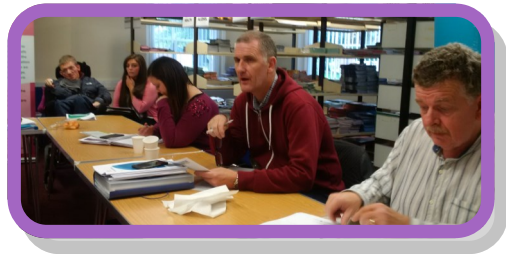


Involving and Improving



Southern Health and Social Care Trust Personal and Public Involvement (PPI) Annual Progress Report 2016/17

Involving and Improving

Foreword - by Angela McVeigh Director of Older People and Primary Care

As the lead Director for Personal and Public Involvement (PPI) in the Southern Health and Social Care Trust (SHSCT) it gives me great pleasure to present this seventh Annual Report outlining progress made during 2016/17 to further promote and embed personal and public involvement in the planning, development and delivery of our services.



The PPI Panel continues to play a significant role in terms of helping us shape user and carer involvement processes and during the year members worked closely with the PPI Team to review and update the PPI Toolkit for staff, the PPI Strategy and Consultation scheme. Once finalised, these draft documents will be circulated for wider comment. PPI Panel members continue to be involved in consultations on the Trust's plans and participate in a range of Trust meetings and regional groups including the Regional PPI Forum. They continue to play a significant role in the development of our PPI resources and this year two members were involved in the selection process for our new Director of Performance and Reform.

Effective PPI requires time and dedication and we appreciate the commitment shown by our staff, service users, carers and members of the local community in helping us to improve our decision making and service delivery for the benefit of patients and the wider population. I would therefore like to thank all those who have worked alongside us over the past year and look forward to their continued support in the future.

Angela McVeigh, Director Older People and Primary Care

Introduction



PPI, Personal and Public Involvement, Service User Involvement, PCE, Patient Client Experience, Co-production, Engagement, Community Development, Quality Improvement and the list goes on.

Are they the same thing? Are they different?
Do they connect? #confused.com

There are so many terms used now to describe and define the process of engaging and involving those who use health and social care services. Ultimately the purpose of such involvement is to ensure that those who use our services have a positive experience and receive safe high quality care to meet their needs. However, we acknowledge that the language of involvement has become crowded and possibly confusing.

The 'PPI Cycle diagram' (on page 3) has been developed to outline the Personal and Public Involvement Cycle within the Southern Trust highlighting the connections between the Patient Client Experience/10,000 Voices, Complaints and Compliments, Co-production and Quality Improvement which are underpinned by the use of community development approaches throughout.*

- 1. Experience** - People use Southern Trust health and social care services and have expectations of the service. People can have a good experience, a bad experience or a mixture of good and bad experiences throughout their treatment and care
- 2. Engagement** - A range of formal and informal methods are used to gather feedback from staff, service users and carers. These include the 10,000 Voices surveys, local service questionnaires and focus groups and compliments or suggestions received. All of this feedback provides the Trust with information on what works well and identifies issues that need to be addressed.

Involving and Improving

Introduction continued

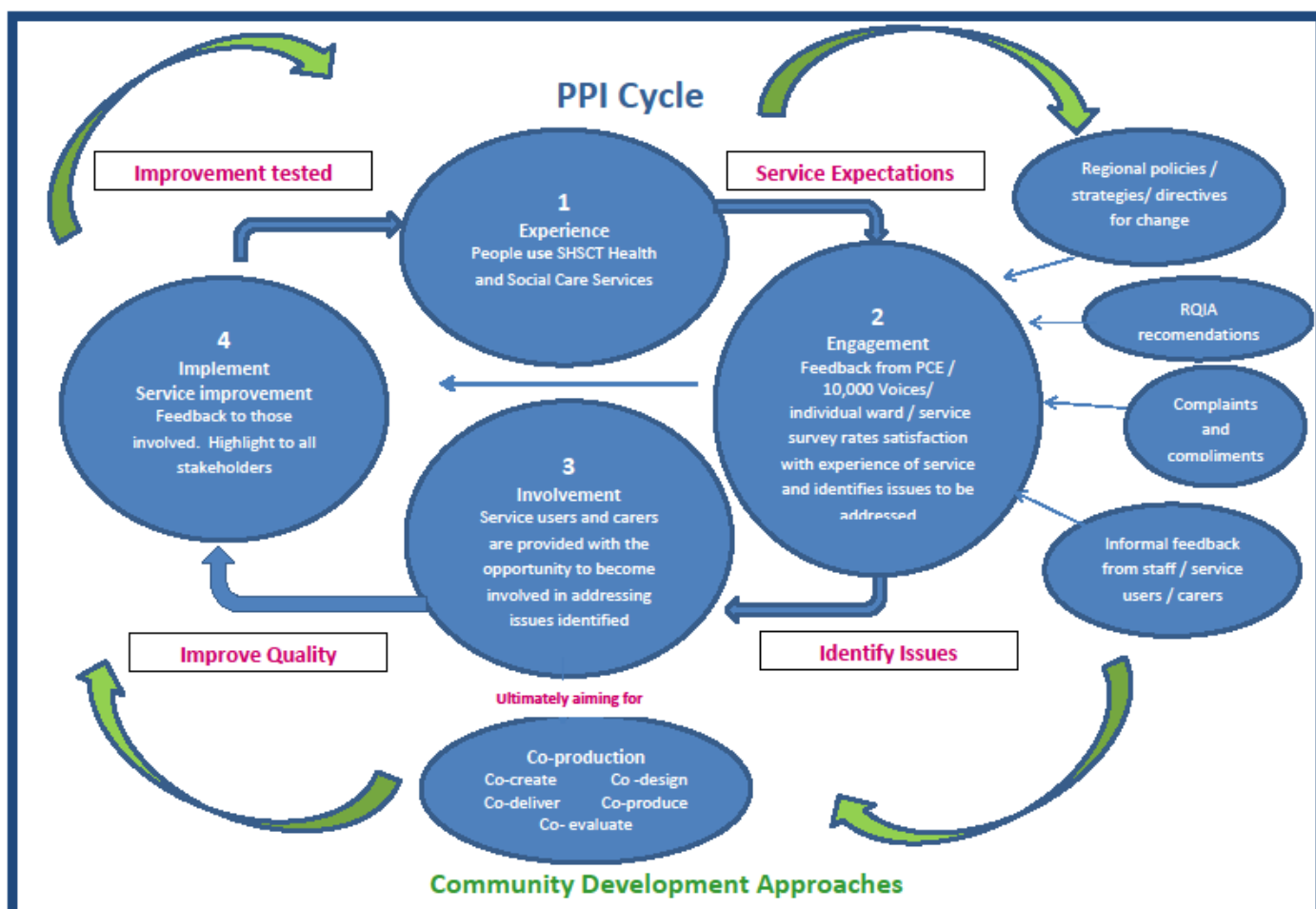
3. Involvement - Service users and carers are provided with the opportunity to become involved in addressing the issues identified. *This is also an opportunity for the Trust to check that the right issues have been identified.* In some cases, issues such as staffing, staff training, disciplinary matters, team structures, internal processes, new ways of working etc. can be addressed directly by the Trust and contribute to service improvement. Others require the involvement of those who have experience of the service to tease out the issues and develop a solution that will meet the needs of the Trust and those who use the service. We aim to **Improve Quality** through co-design and/or **co-production** where possible.

PPI, completed well, will lead to co-production as the pinnacle of the engagement and involvement process.

4. Implement Service Improvement - Service is improved, feedback provided to those involved and improvement highlighted to all stakeholders. The **improvement is tested** when people use the service. The PPI Cycle continues. Services are continually improved.

*Community development approaches *are used throughout the PPI Cycle*

Community development approaches aim to re-shape relationships within and between communities and organisations to strengthen the foundations for collective action and partnership working. This includes changing power in relationships as well as extending the reach of social networks



Involving and Improving

Introduction continued

Personal and Public Involvement is a statutory duty. The Health and Social Care (Reform) Act (Northern Ireland) 2009 places a requirement on all health and social care (HSC) bodies to effectively involve local people in plans and decisions about service provision in their area.

The regionally agreed PPI Standards set out the minimum levels expected of HSC organisations in terms of:

- ◆ **Leadership**
- ◆ **Governance**
- ◆ **Opportunities and support for involvement**
- ◆ **Knowledge and skills**
- ◆ **Measuring outcomes**

The PPI Performance Management Framework requires Trusts to complete annual self assessment monitoring returns. Following assessment, including a verification and improvement visit, the PHA publishes a PPI Monitoring report for each Trust. These reports are available to download from the PHA website.

This PPI Annual Report provides a summary of progress made within Southern Trust during 2016/17 against each of the regional PPI standards. Included are some examples of the work that has been carried out across directorates as the Trust continues to promote and embed PPI.



Highlights this year include.....

- PHA PPI Monitoring Report 16/17 concludes:
 - “SHSCT continue to be the most advanced Trust in relation to complying with the Statutory Duty of Involvement and Consultation.”
- Development of a leaflet to clarify the relationship between PPI, Patient Client Experience, Co-production and Quality Improvement - this was shared with the Department of Health (DoH), together with our revised PPI Toolkit, to inform the development of their Co-production Toolkit
- Launch of PPI Research Report – regional action plan being developed to progress the 10 recommendations. Easy Read Summary being developed
- Regional E-Learning PPI Awareness module uploaded on Trust E-Learning Platform - 2,106 Trust staff now trained in PPI awareness - which is almost a fifth of the work force
- Development of a central register of opportunities for involvement
- PPI Panel members, staff, trade unions and community voluntary organisations involved in selection process for Director of Performance and Reform
- A further Quality Improvement Event was held in October 2016 to showcase service improvements designed and implemented in partnership with service users and carers



Standard One - PPI Leadership

Organisations will have in place, clear leadership arrangements to provide assurances that PPI is embedded into policy and practice

The Southern Trust has signalled at the highest level, through its Corporate Values and Strategic Priorities, its commitment to the meaningful involvement of service users, patients, carers, communities and the wider public in the development, evaluation and delivery of health and social care within the Southern area. In line with the regional PPI Standards key performance indicators, the Trust has a PPI Leadership structure in place that includes:

- ✓ **Named executive and non-executive PPI Lead at board level with clear role descriptions and objectives**
- ✓ **PPI operational lead**
- ✓ **PPI leadership structure throughout the organisation**

While PPI is the responsibility of all staff there are a number of key staff within the Trust whose responsibility is to drive, monitor and develop PPI across the Trust.



Angela McVeigh,
Director OPPC & Lead
Director for PPI,
Executive Director of
Nursing & Lead Director
for Patient Client
Experience (PCE)



John Wilkinson,
Non-Executive
Director with
responsibility for
PPI & Chair of
PCEC



Sharon Doherty,
Service User,
Carer, Co-Chair of
PPI Panel and
member of PCEC



Gerard Rocks,
Assistant
Director
Promoting
Wellbeing



Carolyn Agnew,
Head of User
Involvement &
Community
Development &
Co-Chair of the
PPI Panel

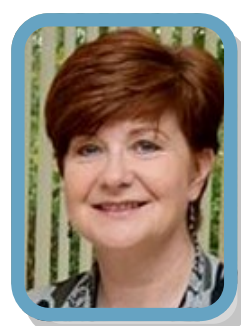


Neil Gillan
User
Involvement
Development
Officer

Mairead Casey,
Patient Client
Experience
and 10,000
Voices
Facilitator



Fiona Wright,
Assistant Director
of Nursing
Governance with
responsibility for
Patient Client
Experience (PCE)



In addition there are **a number of other support posts** to facilitate the development of key aspects of the PPI agenda including a Carers Coordinator, Equality Manager, Patient Advocates, Patient Support and Volunteer Coordinators.

The Trust continues to use a top down bottom up approach to ensure that PPI is an integral part of our working practice and that service users, carers and other stakeholders are involved in the development of the mechanisms, processes, training and resources to embed PPI. Further progress this year includes:

- **Appointment of one replacement and an additional temporary User Involvement Development Officer. Unfortunately the additional temporary post could only be funded until 31/3/17**
- **A further Quality Improvement Event was held in October 2016 to showcase service improvements designed and implemented in partnership with service users and carers**
- **Election of new chairperson and vice-chair of the PPI Panel**

Standard One - PPI Leadership

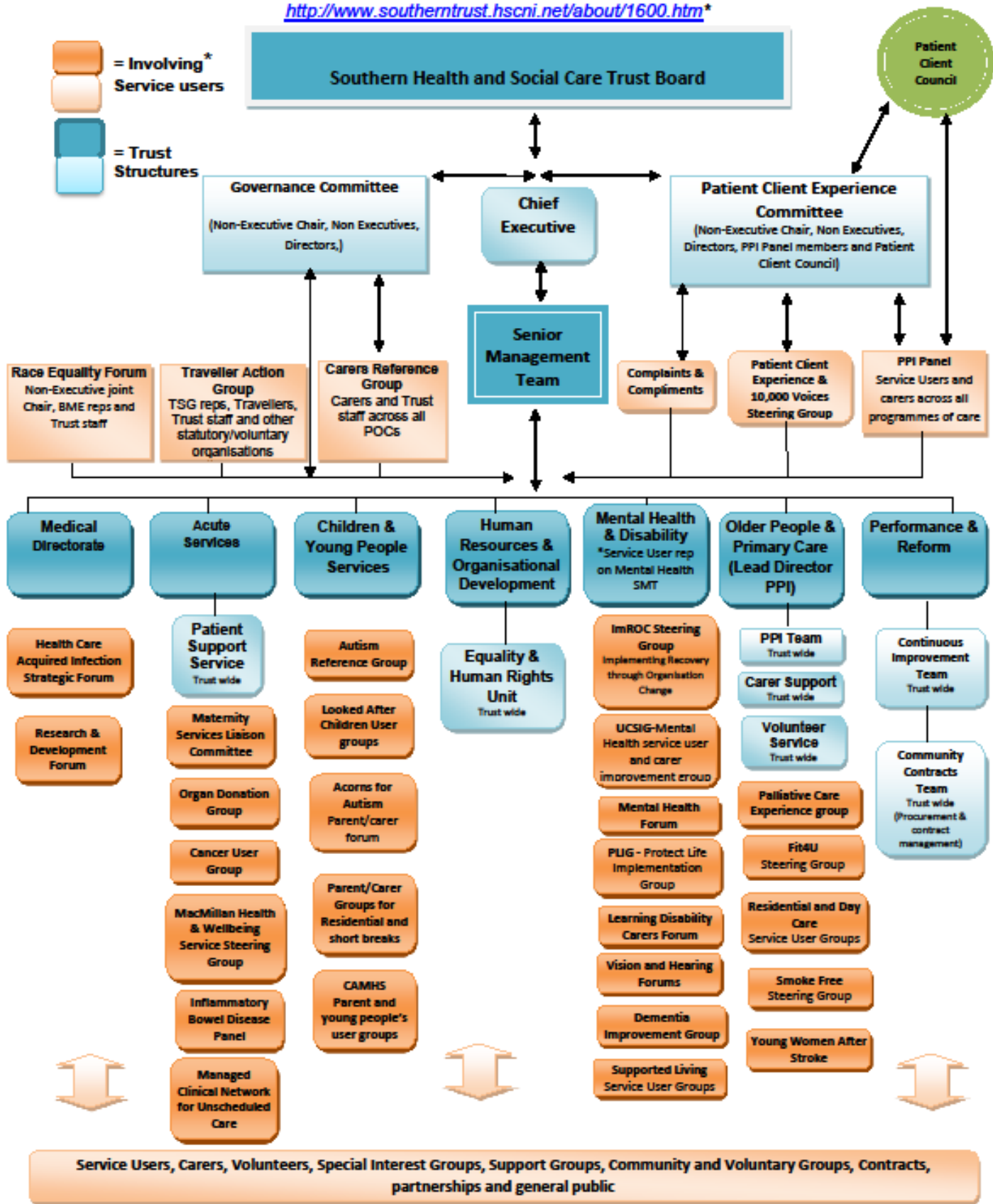
Organisations will have in place, clear leadership arrangements to provide assurances that PPI is embedded into policy and practice

Southern Trust PPI Structures

Appendix 2 – SHSCT PPI Structures & Accountability Flow Chart

*Information on the Trust's opportunities for involvement is available on the Trust website

<http://www.southerntrust.hscni.net/about/1600.htm>*



Standard Two - Governance

Organisations will have in place, clear corporate governance arrangements to provide assurances that PPI is embedded into policy and practice

In line with the regional PPI Standards key performance indicators, the Trust has:

- ✓ **Governance and corporate reporting structures in place for PPI**
- ✓ **A corporate and directorate action plan with defined outcomes developed to demonstrate the impact of PPI**
- ✓ **An annual report demonstrating evidence of compliance with PPI responsibilities and the work undertaken to address challenges in this area**

Governance and corporate reporting structures in place for PPI

The PHA PPI Monitoring Report 2016/17 commended the Southern Trust governance structures in regard to PPI:

“the governance model in operation, truly demonstrates how a large organisation can incorporate the voice of service users and carers at a strategic level and this is to be congratulated.”

These are outlined on the flow chart on page 6 and include:

Trust Board

The Trust Board functions as a corporate decision-making body and comprises a Chairman and **seven Non-Executive Directors appointed by the Minister of Health via the Public Appointments Unit**, and **five Executive Directors** who include the Chief Executive and Directors representing:

- **Directorate of Children and Young People’s Services**
- **Directorate of Mental Health and Disability Services**
- **Medical Directorate**
- **Directorate of Finance**

The Chair of the Board has certain delegated Executive powers and is responsible for the operation of the Board and chairing all Board meetings when present. The Chair works closely with the Chief Executive to ensure key and appropriate issues are discussed by the Trust Board in a timely manner with all the necessary information and advice being made available to the Board.

The Trust Board holds approximately seven meetings in public each year. Each Trust Board meeting has an agenda item that focuses on a patient/client centred service which includes feedback and learning from PPI activity.

Further information on Trust Board including minutes of meetings is available at:

<http://www.southerntrust.hscni.net/about/1655.htm>

The Patient Client Experience Committee (PCEC)

The PCEC is a sub-committee of Trust Board. This group is responsible for leading the coordination, development, implementation and monitoring of the Trust’s PPI Action Plans across the organisation. The PCEC has four PPI Panel representatives with full voting rights and PPI is a standing agenda item alongside Complaints and Compliments and the Patient Client Experience. The Committee is now chaired by a new Non - Executive Director, Mr John Wilkinson and in March 2017 held a review workshop to take stock of progress to date and to consider how the PCEC will be further developed to meet future needs.

Standard Two - Governance

Organisations will have in place, clear corporate governance arrangements to provide assurances that PPI is embedded into policy and practice

Governance Committee

This is also a sub-committee of Trust Board providing assurance to the Board on all aspects of governance except financial control.

Senior Management Team (SMT)

The Senior Management Team, chaired by the Chief Executive, brings together senior Executives including the Executive Directors to the Trust Board. The SMT is responsible for both the implementation of the Trust's strategies and policies and key operational matters.

The Trust's Service User and Carer PPI Panel

The PPI Panel is now in its seventh year comprising service users and carers membership with the aim of having representation from across all programmes of care and Section 75 groupings. The Panel has been jointly chaired by a service user/carers and the Head of User Involvement and Community Development.



The Panel continues to provide feedback on how the Trust is progressing its PPI agenda and works with the Trust to enhance PPI across all of its services.

In March 2017 the Panel has further developed, and in line with its Terms of Reference, elected a **new chairperson, Mr Peter Donnelly and vice-chair, Mr Willie McKeown**. Panel members thanked the outgoing chairperson Mrs Sharon Doherty for all her work in bringing the Panel to where it is now.



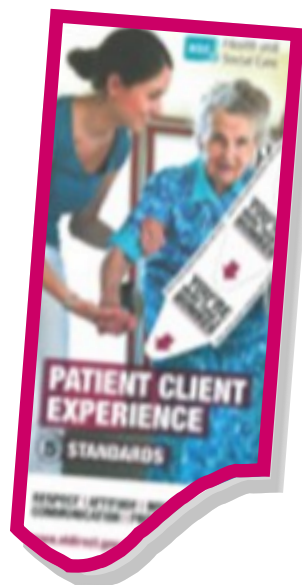
During 2016/17 the PPI Panel:

- Welcomed new members , including a member of the Mental Health Users and Carers Service Improvement Group (UCSIG) to ensure links between these 2 groups
- Reviewed its terms of reference and chairing arrangements
- Reviewed and up-dated the recruitment flyer and PPI Panel information Pack
- Reviewed and up-dated the PPI Panel Induction Training
- Participated in review of the Trust's PPI Strategic Plan and its PPI Toolkit
- Participated in the PPI monitoring and verification process April 2016
- Chaired workshops at the Quality Improvement Event October 2016
- Presented at PPI Research Launch February 2017
- Presented an overview of the Panel and its work at the Patient Client Experience Committee Workshop March 2017
- Continued to participate in a number of PPI Forums both within the Trust and regionally

The Panel is currently developing its action plan for 2017/18.

Patient Client Experience (PCE) and 10,000 Voices Steering Group

This group, chaired by the Executive Director for Nursing, drives a work programme in the directorates in line with the Regional PCE Steering Group Action Plan. The group approves and monitors an annual work plan to address the regional priorities, progress directorate specific initiatives and prioritises elements for reporting to the Trust's PCE Committee at its quarterly meetings. Two members of the PPI Panel are involved in this group.



Standard Two - Governance

Organisations will have in place, clear corporate governance arrangements to provide assurances that PPI is embedded into policy and practice

For further information on PCE please see page 21 or contact **Mairead Casey**,
Patient Client Experience & 10,000 Voices Coordinator

Email: mairead.casey@southerntrust.hscni.net

Tel: [028 3756 6764](tel:02837566764)

Mob: [07789505502](tel:07789505502)

Complaints and Compliments

The Trust is committed to providing a high quality service to all users. Your views can help us improve our services. They are very much appreciated and are treated in confidence.

You may want to:

- **Make a comment or suggestion**
- **Tell us what was good about your experience by making a compliment, or**
- **Make a complaint about our services**

All comments, suggestions, compliments or complaints should be made initially to the Corporate Complaints Officer based at Trust Headquarters, Craigavon Area Hospital, Portadown, BT63 5QQ Tel: [028 3756 4600](tel:02837564600)

Email: complaints@southerntrust.hscni.net

Initially you may wish to express your concerns to the person who is providing the care or service. If you do this and are still not satisfied you may express your concerns in writing, by email, by telephone or by arranging an appointment with the Corporate Complaints Officer.

Our **'We Value Your Views'** leaflet provides more detail - this is available at Trust facilities and on the Trust website <http://www.southerntrust.hscni.net/contact/1614.htm>

Quarterly reports on complaints and compliments are presented and trends discussed at the PCEC meetings.

The Race Equality Forum

The Race Equality Forum provides opportunities for consultation to enable Black, Minority and Ethnic (BME) Communities, in the Southern Area, enter into dialogue and influence Trust policies on issues of fundamental importance identified by the Race Equality Forum participants and others.

For further information please contact **Lynda Gordon**, Head of Equality,

Email: Lynda.gordon@southerntrust.hscni.net Tel: [028 3756 4151](tel:02837564151)

The Trust Carers' Reference Group

The Carers' Reference Group continues to address the on-going needs and issues relating to carers in the Southern Trust area. Chaired by the Assistant Director for Older People's Services, membership comprises Trust senior managers who have been nominated as Carers' Champions for their programme of care, the Trust's Carers' Coordinator and carers from across each of the Trust's three localities. This group develops an annual Carers' Action Plan and meets on a quarterly basis to discuss and monitor progress on the implementation of the Carers' Strategy and the Trust Carers' Action Plan. Quarterly reports, detailing the performance of the Trust in relation to the objectives laid out by the Health and Social Care Board Carers' Strategy Implementation group, are scrutinised by the Trust's Governance Committee, Senior Management Team and Trust Board before submission to the Health and Social Care Board. The main aim of the group is to support carers to engage in the planning and review of services and to champion the rights of carers within the Trust.

Further details can be found in the **Carers' Annual Progress Report 2016/17** and available to download on the Trust website @: <http://www.southerntrust.hscni.net/services/1581.htm>



Standard Two - Governance

Organisations will have in place, clear corporate governance arrangements to provide assurances that PPI is embedded into policy and practice

The **Traveller Action Group (TAG)** meets every three months to share information regarding support services for Travellers. TAG also ensures these services are suitable to meet Traveller needs and that Travellers are aware of their existence and how to access them.

The Traveller Action Group is chaired by the Assistant Director of Promoting Wellbeing, Southern Health and Social Care Trust and there is representation from:

- Other Southern Health and Social Care Trust staff
- Local Traveller Support Groups
- Early Years Toybox
- Traveller Education Support Service (TESS)
- Housing Executive
- Public Health Agency
- Local Councils

The Traveller Action Group was established in 2010. Travellers attended these meetings for a number of years however more recently, while there has been no direct Traveller involvement, Traveller Support workers feedback to Travellers on the progress being made by the group and bring issues from the Travellers they work with to the meetings for discussion.



Further details can be found in the Traveller Action Group Progress Report 2016/17 available to download on the Trust website: <http://www.southerntrust.hscni.net/about/3655.htm>

Trust Directorates and Opportunities for Involvement

The Trust delivers its health and social care services through 4 operational directorates:

- Directorate of Children and Young People's Services
- Directorate of Mental Health and Disability Services
- Directorate of Older People and Primary Care Services
- Directorate of Acute Services

These directorates are supported by:

- The Medical Directorate
- The Directorate of Human Resources and Organisational Development
- The Directorate of Performance and Reform, and
- The Directorate of Finance

Each of the operational directorates comprises a variety of long standing service improvement groups which includes service user and carer representation.

Details for involvement opportunities and the relevant contact details can be found at

<http://www.southerntrust.hscni.net/about/1600.htm> and on

SharePoint <http://sharepoint/oppc/uicd/PersonalandPublicInvolvement/SitePages/Home.aspx>

Standard Two - Governance

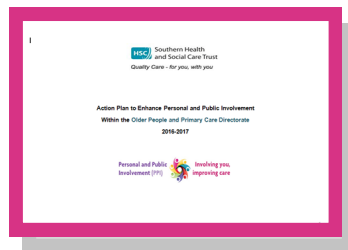
Organisations will have in place, clear corporate governance arrangements to provide assurances that PPI is embedded into policy and practice

Action plan with defined outcomes developed to demonstrate the impact of PPI

The Trust's **PPI Strategic Action Plan 2010 - 2013** and **Consultation Scheme** are currently being reviewed and up-dated in line with the new PPI Standards. The Trust's **Corporate PPI Action Plan 16/17** reports against the new PPI standards.

Individual Directorates develop annual **Directorate Specific PPI Action Plans** as part of the business agenda of the Directorate. These inform the progress the Trust is making against the regional PPI standards.

These Directorate PPI Action Plans focus on four key themes:



1. Information
2. Levels of Involvement
3. Training
4. Monitoring and Evaluation

PPI Indicators have been developed for each of the four key themes and the PPI Team collate information from the directorate **PPI impact template returns** twice a year to provide directorate progress monitoring reports. This enables the Trust to highlight areas of good practice and identify areas for further and/or targeted development.

At the end of each year, the Trust develops a Corporate PPI Action Plan and Progress report that is then made available on its website.



Annual report demonstrating evidence of compliance with PPI responsibilities and work undertaken to address challenges in this area

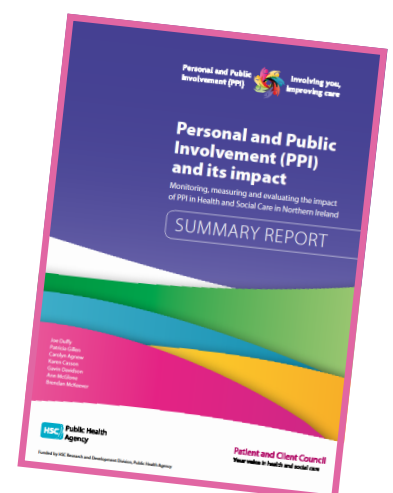
Copies of the Trust's previous PPI Annual Reports entitled "**Sharing Our Stories**" are available at:

<http://www.southerntrust.hscni.net/1600.htm>

PPI Research - Personal and Public Involvement and its Impact: Monitoring, Measuring and Evaluating the Impact of Personal and Public Involvement in Health and Social Care in Northern Ireland in Northern Ireland

Two members of Trust staff were involved with Willowbank Community Resource Centre and a peer service user researcher in a PPI Research Project (funded by the HSC Research and Development Division of the PHA) led by Queen's University and the University of Ulster. Two members of the PPI Panel were involved in the Research Advisory Group and other service users, carers and Trust staff completed the on-line questionnaire and took part in the focus groups in the Southern Trust area. The research report **Involvement and its Impact: Monitoring, Measuring and Evaluating the Impact of Personal and Public Involvement in Health and Social Care** was officially launched at the Junction, Dungannon in February 2017.

The research report made 10 recommendations which are highlighted overleaf.



Standard Two - Governance

Organisations will have in place, clear corporate governance arrangements to provide assurances that PPI is embedded into policy and practice

10 Recommendations

1. Adequate and dedicated resources are essential
2. Ongoing process of raising awareness of PPI required
3. PPI needs to be defined in a meaningful way
4. Each Trust should develop a PPI Champion staff role with small team
5. Social Media and Technology should be used to promote PPI. This should include a one-stop website
6. Structured Evaluation must be built in to measure effectiveness
7. Feedback on impact should be standard practice
8. PPI training should be made available to all staff
9. PPI should be a core feature of all Trust recruitment and appraisal processes
10. PPI needs to be built into accountability structures and decision making processes at senior manager/director level

The PHA is developing an action plan to take forward the recommendations. The recommendations from this research have informed the Trust's PPI Action Plans and the review of our PPI strategy.

A copy of the report can be found at:

<http://www.publichealth.hscni.net/publications/personal-and-public-involvement-ppi-and-its-impact>



*Carolyn Agnew Co-Investigator,
Patricia Gillen Co-Chief Investigator
and Joe Duffy Chief Investigator
photographed at the
PPI Research Launch February 2017*

*PPI Panel member and member of the
PPI Research Advisory Group Ray
Hamilton with Joe Duffy following his
presentation on "What PPI Means to Me"
at the PPI Research Launch February 2017*



Standard Two - Governance

Organisations will have in place, clear corporate governance arrangements to provide assurances that PPI is embedded into policy and practice

External monitoring and verification

The Public Health Agency (PHA) has responsibility for leading implementation of policy on PPI across the HSC and ensuring that HSC Trusts meet their PPI statutory and policy responsibilities/obligations. The PHA in turn provides assurances to the Department in this regard through the established accountability arrangements.

In May 2016, the PHA produced a Monitoring Report on the mechanisms and processes the Southern Trust has in place for embedding PPI and progress made.

This report was based on evidence gathered through:

- The Trust PPI self-assessment monitoring return (approved by the PPI Panel)
- Information collated during the verification monitoring visit (April 2016)
- Additional evidence supplied by the Trust (Annual report, Action Plans, PPI resources developed)

Progress was measured against the regional PPI Standards. There were eight recommendations for improvement which the Trust has actioned as existing resources permit. The Trust continues to highlight the need for further dedicated resources to provide the necessary support to help staff to embrace and undertake PPI.

The Public Health Agency report concluded that:

“On a review of the evidence, the Southern HSCT continues to be the most advanced Trust in relation to complying with the Statutory Duty of Involvement. PPI continues to be embedded into the Trust governance and decision making processes and is a core action and reporting element within each Directorate.”

“It is apparent that the resources dedicated to PPI continue to make a significant difference to the culture and practices operating within the organisation. The development of a PPI Action Plan within each Directorate puts a clear focus on the actions required to appropriately involve service users and carers.”

“From a practical perspective, the evidence presented demonstrates that support is required to develop skills, knowledge and confidence to engage with service users and carers. In areas where PPI skills have been developed, improved outcomes and an increased consideration of PPI in current and planned work is evident.”

“The PHA will continue to support the Trust to showcase and share models of good practice across other HSC organisations. In particular, the governance model in operation, truly demonstrates how a large organisation can incorporate the voice of service users and carers at a strategic level and this is to be congratulated.”

A copy of the PHA report can be downloaded at:

<http://www.publichealth.hscni.net/sites/default/files/directorates/files/SHSCT%20final%20report%202016.pdf>

Further monitoring is due to take place in June 2017.

Standard Three - Opportunities and Support for Involvement

HSC Organisations will provide clear and accessible opportunities for involvement at all levels, facilitating and supporting the involvement of service users, carers and the public in the planning, delivery and evaluation of services

In line with the regional PPI Standards key performance indicators, the Trust :

- ✓ **Maintains an up-to-date register of existing and future opportunities for involvement at all levels across the organisation, which is accessible by the public**
- ✓ **Supports the involvement of service users, carers and the public to include:**
 1. **Clarity on roles/responsibilities for those participating**
 2. **Training, support and advocacy if required**
 3. **Use of accessible communication mechanisms and procedures**
 4. **Good Meeting Etiquette**
 5. **Application of interim service user, carer and stakeholder reimbursement guidelines and procedures for HC organisations**
- ✓ **Provides named points of contact for each individual engagement exercise**
- ✓ **Provides feedback to those involved in each engagement as standard practice**
- ✓ **Identifies barriers to involvement and develop action to overcome these**

Maintains an up-to-date register of existing and future opportunities for involvement at all levels across the organisation, which is accessible by the public

The Trust has developed a register of its existing on-going opportunities for involvement highlighted in the flow chart on page 6. **This is available on the Trust website @:**

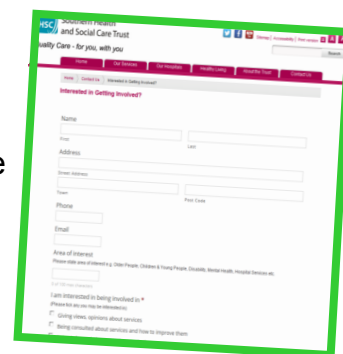
<http://www.southerntrust.hscni.net/about/1600.htm>

A **registration form** template has been developed so that each service area can maintain its own list of interested people and circulate opportunities for involvement as they arise. There is also an **on line registration facility** and the details of those who register are forwarded to the relevant service team. [Click here](#) to view the on line registration facility.

Service teams contact their own service users and carers when consulting and making changes to services, policies etc. This is also a requirement of the **Equality Screening process**.

As part of the PPI Action Plan framework, a template **for opportunities for involvement** has been developed for completion and should be displayed in service areas alongside the **'Have Your Say'** poster.

Teams and services are using the **Opportunities for Involvement** template in a flyer format to promote focus groups, meetings etc. Here are examples of flyers that services have used in the past year to highlight opportunities for involvement.



Standard Three - Opportunities and Support for Involvement continued

HSC Organisations will provide clear and accessible opportunities for involvement at all levels, facilitating and supporting the involvement of service users, carers and the public in the planning, delivery and evaluation of services

The Promoting Wellbeing Team has a community and voluntary sector mailing list and mailing list of service user / carer groups and interested people. Information on opportunities for involvement are circulated on a regular basis.

Please contact esme.brown@southerntrust.hscni.net if you would like to be included on the list or if you wish to circulate information via the mailing lists.

The Trust has a **Facebook** page and **Twitter** account and **opportunities for involvement** are circulated via these. The Trust also uses **YouTube** as a platform to provide service users, carers and the public with a variety of information including videos, audio interviews. In 2016/17 there continues to be a steady increase in staff availing of these avenues to share information and promote opportunities for involvement.



The Trust has a social media policy to ensure that staff are aware of their responsibilities for the appropriate use of the social media they may access in a personal or professional context.

Please contact Trust Communication Department to have information uploaded on to social media platforms.

Standard Three - Opportunities and Support for Involvement continued

HSC Organisations will provide clear and accessible opportunities for involvement at all levels, facilitating and supporting the involvement of service users, carers and the public in the planning, delivery and evaluation of services

Supports the involvement of service users, carers and the public

1. **Clarity on roles/responsibilities for those participating**
2. **Training, support and advocacy if required**
3. **Use of accessible communication mechanisms and procedures**
4. **Good Meeting Etiquette**
5. **Application of interim service user, carer and stakeholder reimbursement**

1... Clarity on roles/responsibilities for those participating

- The PPI Team in partnership with the PPI Panel has developed a template Information Pack for those interested in being involved in specific opportunities which provides background information and outlines what to expect and the commitment required. The template has been tailored and used for the PPI Panel, Carers Reference Group, and a range of other service user and carer forums and groups. The template is available to download from the Trust's website <http://www.southerntrust.hscni.net/about/1600.htm> and can be tailored to suit the needs of your group
- Members of the **Condition Management Programme** have been actively developing their skills in using a group approach which included:- building their competency in organising their own meetings, interacting with others in the group, planning and carrying through on agreed work tasks, attending meetings with DEL/CMP staff, making presentations and liaising/advocating on behalf of the group (and compromising on occasions). The upside to this is that a number of group members have developed the interest and confidence to consider seeking paid posts as service user advocates and/or as co-facilitators in the Trust's Recovery Colleges

2... Training, support and advocacy if required

- PPI Panel **induction and refresher training course** held February 2017
- **PPI Cycle** developed following the review of the Patient Client Experience Committee (see page 3)
- **OCN NI Level 3 Award in Quality Improvement - Foundation** will be made available to service users and carers with the first programme scheduled for September 2017
- The **Southern Trust Mental Health Forum** has completed the development of their well regarded website and are training other service users in its maintenance and development. The steering group hope that other service users can take this work forward and will be giving others with an interest in e-media the opportunity to gain experience and skills in Website management. The website is located at: <http://www.thementalhealthforum.co.uk/>
- Following on from the establishment of a **foster carer's forum** in the Newry and Mourne area, a group has been developed in the Armagh and Dungannon locality. The aim of these groups will be to involve carers in service development, recruitment and training of new foster carers
- The **Volunteer Service** continues to provide corporate induction training for all new volunteers. Safeguarding Awareness training is offered twice a year and other role specific training such as Moving and Handling is also available via e-learning



Standard Three - Opportunities and Support for Involvement continued

HSC Organisations will provide clear and accessible opportunities for involvement at all levels, facilitating and supporting the involvement of service users, carers and the public in the planning, delivery and evaluation of services

3. Use of accessible communication mechanisms and procedures

- **Bereavement Booklet** revised and **translated** into a range of languages to meet the needs of BME communities <http://www.southerntrust.hscni.net/services/2397.htm>
- On average **12-15** people attend the quarterly **Vision Forum** meetings. Minutes are provided in large print, braille audio CD and via email to ensure accessibility and good communication. A Bi-annual news and views newsletter for blind and partially sighted services users is circulated and Distributed to **800+service users**. This is delivered in a range of accessible formats
- There has been a **range of consultations with Deaf and Hard of Hearing people** regarding the new sign language partnership framework Draft Sign Language Bill. Although there is no formal Hearing Forum monthly evening consultations are held with the deaf and hard of hearing community in their own locality and setting. A quarterly newsletter "**Sign of the Times**" is distributed to approximately **110 Profoundly Deaf sign language service users** in the Southern Trust area



- All **Children's Disability teams** now have **information folders** which are distributed to families at first contact. The teams continue to work with the PPI officer to take forward plans aimed at increasing user and carer involvement



- The **Radiology Service** continues to involve service users in the evaluation of services, seeking to identify any areas for improvement. The teams have also recently sought the views of the PPI Panel in relation to the development of a poster to promote a new clothing policy to improve the diagnostic quality of X-rays. This involvement ensures that the Trust continues to communicate information in a way that is easily understood by all

- Development of **information placemats for patients** to provide practical advice and information in relation to admission and discharge and key points in a patient's journey. The placemats also provide advice to patients and carers on how to make a comment / complaint or become more involved in the planning, delivery and evaluation of services



- Members of the **ImROC (Implementing Recovery through Organisation - Change)** communication sub-group have reviewed Mental Health service leaflets to ensure consistency and clarity. Service users and staff from the Trust and voluntary sector worked together and made a number of suggestions aimed at ensuring that users of services and their families have a clear idea as to what our services entail, and also to the limitations of services/starting point of other services



Following concerns raised by service users three Health Booklets were co-produced with service users and carers to highlight the importance of regular health checks for prostate, Abdominal Aortic Aneurism screening and menopause and to encourage people with learning disabilities to take more responsibility for their own health and wellbeing

4. Good Meeting Etiquette

Good Meeting Etiquette Posters developed in partnership with the PPI Panel are displayed in Trust meeting rooms. This poster is available to download at:

<http://www.southerntrust.hscni.net/about/1600.htm>

5. Application of interim service user, carer and stakeholder reimbursement guidelines and procedures for HC organisations

- Continued application of guidelines and procedures developed by the Trust and adapted by PHA for regional use. These can be located at: <http://www.southerntrust.hscni.net/about/1600.htm>

Standard Three - Opportunities and Support for Involvement continued

HSC Organisations will provide clear and accessible opportunities for involvement at all levels, facilitating and supporting the involvement of service users, carers and the public in the planning, delivery and evaluation of services

Provide feedback to those involved in each engagement as standard practice

Feedback is a crucial element of PPI. It is very good practice to let participants know what has been achieved as a result of their involvement otherwise, they may be reluctant to become involved again. Feedback to service users, carers and the public can be delivered in different formats. The following are mechanisms the Trust has in place to ensure feedback is standard practice:



- The PPI Annual Report provides summary feedback of the overall PPI Trust Activity
- PPI Directorate and Carer Summary flyers
- Variety of service newsletters e.g. ICT Newsletter, Recovery Newsletter
- PPI Feedback poster
- Compliments poster

The PPI Team, in partnership with the PPI Panel and Trust staff, has developed a PPI Feedback template which is **available to download from the Trust's website at** <http://www.southerntrust.hscni.net/about/1600.htm> and can be tailored to suit your activity needs

Identification of barriers to involvement and develop actions to overcome these

While the Trust continues to prioritise and remains committed to PPI it continues to do so within existing resources. It has identified a number of barriers that limit development and progress and has continued working, throughout the year, to progress actions to overcome these

Resources to support PPI

- The Trust makes best use of its available resources and continues to highlight the need for additional recurrent resource for PPI to the PHA and DoH

Capacity within the PPI Team

- During 16/17 approval was obtained to employ an additional **User Involvement Officer** to enable the Trust provide additional support to directorate staff and commence roll-out of the regional Engage and Involve PPI Training programme which includes modules on the additional skills staff require such as: group work, facilitation skills, questionnaire design and analysis. The additional User Involvement Officer was recruited and commenced post in October 2016, however this post is due to terminate in April 2017 as there is no identified funding stream to sustain it

Ability to capture comprehensive information on PPI activity across the Trust

- In September 2016 the User Involvement Officer completed an accredited quality improvement programme. This programme explored improved methods to aid staff in hospitals deliver PPI guidance and support and to capture the range of PPI activity that is currently on-going across Acute settings without putting staff under unnecessary additional pressures. The User Involvement Officer is now on site in the Health and Wellbeing Hub in Craigavon Hospital on Tuesdays to allow Acute staff to access support when it suits their schedules. However due to the limited capacity within the PPI Team, capturing comprehensive information on PPI activity across the Trust continues to be a challenge

Confusion with understanding component parts of PPI

- The flow chart on page 3 has been developed to outline the Personal and Public Involvement Cycle within the Southern Trust highlighting the connections between the Patient Client Experience/10,000 Voices, Complaints and Compliments, Co-production and Quality Improvement

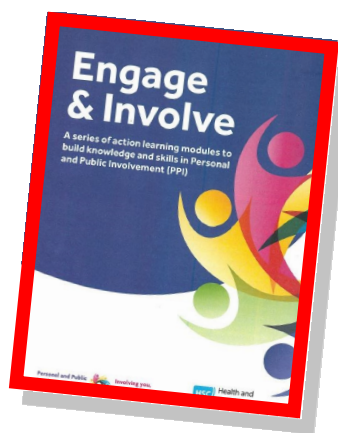
Standard Four - Knowledge and Skills

HSC Organisations will provide PPI awareness raising and training opportunities as appropriate to need to enable all staff to deliver on their statutory PPI obligations

In line with the regional PPI Standards key performance indicators, the Trust:

- ✓ **Integrates basic PPI awareness training into induction arrangements for all new staff**
- ✓ **Evidences compliance with any annually agreed regional targets for the provision of and access to PPI training**
- ✓ **Ensures a mechanism is in place to capture information on the up-take of PPI training**
- ✓ **Demonstrates service user and carer involvement in the design, delivery or evaluation of PPI training**

Integrates basic PPI awareness training into induction arrangements for all new staff



The PHA, in keeping with its leadership responsibilities with regards to the implementation of PPI policy across HSC, has developed a PPI awareness raising and training programme. This has been designed to support staff understand and incorporate PPI into their work practices. The Southern Trust PPI Team and PPI Panel provided significant support and information which contributed to the development of the materials. The PHA require Trusts to deliver this programme, however due to the limited capacity within the PPI Team and the availability of similar learning in other existing Trust training programmes options offered for Southern Trust staff are detailed below:

Induction

The Trust's Corporate Induction Programme makes reference to PPI/PCE and User Views. In addition a PPI Information leaflet for staff outlining support available can be downloaded from the Trust website and continues to be used as a hand-out at training and events. Engage and Involve PPI Coaching and Team Briefing resources are being distributed to all Team Leaders and to members of the Trust's Coaching Forum.

The new Personal and Public Involvement Awareness E-Learning Programme is now available on the Southern Trust E-Learning Platform

This programme, developed by the PHA through the Regional PPI Forum, is aimed at all staff. It provides an introduction to PPI which includes an overview of the statutory duty and case studies to showcase PPI in practice.

PPI Awareness Training for Teams

The PPI Team provides PPI Awareness training to staff and teams on request. Over the past year the majority of this training has taken place during team meetings, when appropriate. This provides an opportunity for team members to discuss their approach to PPI and how they can embed it in their work. The PPI Awareness training is also promoted in the PWB Training Directory which is up-dated and circulated each quarter.

- **PPI Awareness is also presented at the core induction programme for student social workers and new social care staff twice a year**
- **The PPI Team provided the PPI Awareness sections and resources used in the Trust's Continuous Improvement Quality Improvement Leader programmes**
- **The PPI Team also contribute to the Professional Development Programme for Registered Staff Nurses and Registered Midwives SHSCT and the Quality Care Framework (QCF) and the Lean Practitioner Master Class Programmes. Lean Training packs include all of our PPI resources**

Standard Four - Knowledge and Skills continued

HSC Organisations will provide PPI awareness raising and training opportunities as appropriate to need to enable all staff to deliver on their statutory PPI obligations

Practical hints and tips on engaging Service Users and Carers

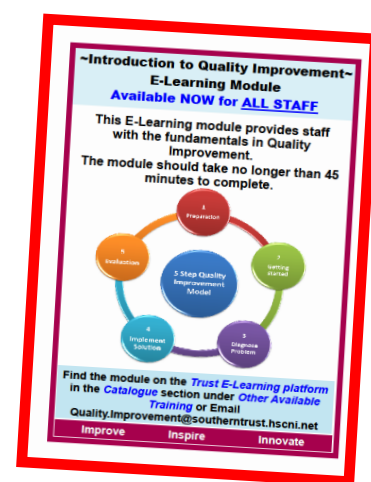
This hour long workshop delivered by the PPI Team and PPI Panel members provides an overview of PPI and outlines practical hints and tips for:- promoting people to become involved, support available, potential barriers, top tips for success as well as giving participants an opportunity to consider how they will apply this in their own area of work.

Quality Improvement programmes

The Southern Trust, through its Continuous Improvement Team, offers a range of **Quality Improvement programmes** that contains a PPI element which includes:- **PPI awareness, communication and PPI, choosing and planning a communication strategy** (that will increase levels of involvement with the chosen audience/client group) and **facilitation skills**.

These include:

1. An Introduction to Quality Improvement
2. Quality Improvement Award
3. Quality Improvement Certificate
4. Quality Improvement Diploma
5. Q2020: Attributes Framework Level 1
6. Code of Practice on Protecting the Confidentiality of Service User Information
7. Taking the Lead Programme



The Continuous Improvement Team also has a range of useful resources to support their training programmes.

These can be accessed on SharePoint by clicking the following link: [resources available](#)

In addition the Team facilitate a number of improvement work “packages” to support the development of a quality improvement culture were **‘No improvement is too small!’**.

These include:

- **Vodcast Programme** - Please click on the link to view some of our staff [Quality Improvement Vodcast](#)
- **Quality Improvement Clinics, Network and Annual Event Continuous Improvement Newsletter**
- For further information on **Quality Improvement Programmes** please contact:

Jacqueline Morton, Head of Continuous Improvement

Tel: 028 37560060 Ext: 60060 or Blackberry: 07920875792

Email: JacquelineT.Morton@southerntrust.hscni.net

Standard Four - Knowledge and Skills continued

HSC Organisations will provide PPI awareness raising and training opportunities as appropriate to need to enable all staff to deliver on their statutory PPI obligations

Other training that supports PPI practice includes:-

Community Development Awareness

This training is available from the Promoting Wellbeing Community Development Workers on request and consists of a 45-minute presentation on the benefits of using community development approaches and support available. It provides an opportunity for team members to discuss how they can embed community development approaches in their work.

For further information or to arrange a training session please contact:

Carolyn Agnew, Head of User Involvement and Community Development

Telephone: 028 3756 4469

Email: carolyn.agnew@southerntrust.hscni.net

The Patient Client Experience (2.5 hour session)

This session focuses on expectations around patient, client and visitor experience within HSC.

Admin Development Programme (2 day programme)

As a result of attending this training, staff should be better equipped to manage their workload, be able to use a range of communication tools effectively and achieve a greater understanding of how service improvement techniques can be applied.

Best Practice for the Administration of Effective Meetings (½ day session)

The purpose of this programme is to equip staff with the skills and good practice hints and tips for effective meeting administration.

Every Conversation Matters (½ day session)

This session covers; engaging behaviour, engaging conversations and team meetings, fundamentals of effective conversation.

New to Line Management (ILM Level 3 Award in Leadership & Management)

This qualification is made up of three units. One of the units is; 'Understanding the Communication Process in the Workplace'. To pass this unit, staff are required to show an understanding of the communication process including the main methods of communication and how to use them. They also need to complete a self-assessment regarding their own communication skills and identify areas for performance improvement.

Middle Manager Programme (ILM Level 5 Award in Leadership & Management)

This qualification is made up of three units including Managing Improvement (the purpose of this unit is to develop understanding and ability to manage quality, to enable plan improvements (to meet or exceed customer requirements) and create professional presentations (The purpose of this unit is to develop knowledge and understanding of creating professional presentations.)

To apply for any of the above programmes, please email

learning.development@southerntrust.hscni.net

Standard Four - Knowledge and Skills continued

HSC Organisations will provide PPI awareness raising and training opportunities as appropriate to need to enable all staff to deliver on their statutory PPI obligations

Recording uptake of PPI training

During 2016/17 a total of **632** completed PPI Awareness e-learning. Total trained F2F: **Staff =161 (10 teams); Students=79; Service users & carers = 26**. This brings the overall total of Trust staff now trained in PPI awareness to **2,106** which is almost a fifth of the work force. **This figure does not include staff who have completed other existing Trust training programmes that provide similar learning to the E&I F2F modules**

Involvement in designing, delivering and evaluating PPI training

The Trust continues to ensure that both service users and carers are involved in the design, delivery or evaluation of PPI training both within the Trust and regionally.

Service Users and carers are also involved in the development of other staff training programmes

An example from this year is the **Professional in Practice (PiP) Community Development Training Programme**. Focus groups were held in March and April 2016 with The Lobbying Activism and Research group (LARG) based in Dungannon and The Citizen's Forum in Belfast to consult on the development of a new post graduate social work community development training course.

Nine service users and two carers from focus groups participated. They asked to be involved, as equals, in the co-production and management of the course, to share "expert" experiences and training opportunities, and to be recompensed for their time. The importance of staff using community development approaches as part of self-directed support was highlighted. There was a recommendation that social workers at all levels should engage in practical projects as part of assignments and that they needed to listen carefully to service users/carers. The course was not approved on its first submission to the Northern Ireland Social Care Council in November 2016 however a new bid will be submitted in April 2017, incorporating recommendations from NISCC.

Other SHSCT PPI Resources

A PPI Toolkit to provide staff and managers with information and good practice guidance to enhance PPI within their service area. This toolkit has been adapted by other HSC Trusts in NI and is used by the PHA as a regional resource. In addition we have had requests from Trusts in England and a University in Dublin requesting permission to use some of our resources:

"I have been asked to create a set of protocols for our staff on service user and carer involvement and while researching this, I came across your Trusts Personal and Public Toolkit for Staff on the internet. I am really impressed with how comprehensive and well written the toolkit is. Would it be possible to use some of the text contained in your toolkit and reference it to Southern Health and Social Care Trust?"

(St. Mary's Hospital, Northamptonshire)

"I am a researcher working in Dublin City University on a project aiming to develop a Patient and Public Involvement (PPI) Framework for use with the Irish Department of Health. This Framework will pertain specifically to processes of National Clinical Guideline Development and National Audit. I am contacting you in relation to the 'Personal and Public Involvement Toolkit' which you have developed for staff of the Southern Health and Social Care Trust. As part of the Framework for Public Involvement that we are developing, we wish to include a number of guidance documents to help individuals to implement the framework successfully. One of these guidance documents will seek to guide individuals in evaluating involvement effectively. We have noted that one of the tools in your toolkit provides a very resources for evaluation; the Record of Public Involvement Practice form.

We wish to seek your permission to adapt this tool for use in our Framework for Public Involvement. Should you grant us permission for this, we will ensure that the form is appropriately referenced and any permission gained will be stated."

(Dublin City University)

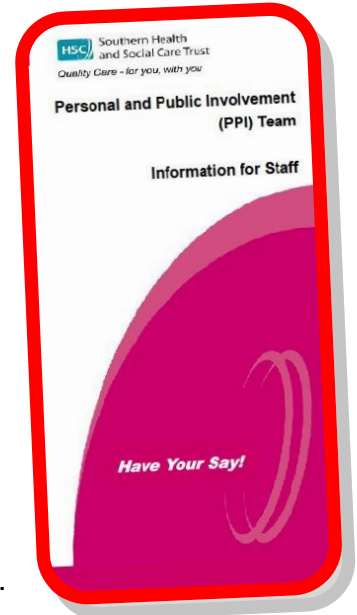


Standard Four - Knowledge and Skills continued

HSC Organisations will provide PPI awareness raising and training opportunities as appropriate to need to enable all staff to deliver on their statutory PPI obligations

The PPI Toolkit is currently being revised and up-dated in line with new guidance issued and the regional PPI standards and we have shared our work to date with the Department of Health to inform the development of their Co-production Toolkit.

Have Your Say posters and leaflets so that staff, service users and carers are aware of the right to involvement



Information leaflet for staff outlining the support available from the PPI Team.

All resources are available to download from the Trust's website

<http://www.southerntrust.hscni.net/about/1600.htm> and from

SharePoint <http://sharepoint/oppc/uicd/PersonalandPublicInvolvement/SitePages/Home.aspx>

The PPI Registration form so that service teams can develop their own local lists of interested people



The PPI Opportunities for Involvement template is still being used so that service teams can let their service users and carers know what opportunities are available



PPI Cycle - see page 3

Good practice guidelines for engagement **'INCLUSIVE' poster** and **Good Meeting Etiquette checklist**



PPI Feedback poster - see page 18

Standard Four - Knowledge and Skills continued

HSC Organisations will provide PPI awareness raising and training opportunities as appropriate to need to enable all staff to deliver on their statutory PPI obligations

Service user/carer testimonial template to record what service users and carers thought of the involvement process and the impact it had for them

PPI Activity Record Completion of this form will guide you through the various stages to be considered and completed in PPI Activity

Service User, Carer and Stakeholder Reimbursement Guidelines Procedures so that those who become involved are not left "out of pocket" as a result of their involvement

PPI compliments poster - to showcase compliments received about care and treatment. This not only provides reassurance for others using the service but it improves staff morale to know that the service they provide is of high quality and is appreciated

A range of factsheets to complement the Toolkit

- * Facilitating Focus Groups
- * How to set up a Service User Group
- * Methods of Involvement
- * What is PPI?
- * Questionnaire design
- * Working with Hard to Reach Groups
- * Advocacy Information Booklet
- * PPI/PCE

Understanding the connection, appreciating the difference
People are often confused by the relationship between PPI and PCE. Are they the same thing? What is the difference?

Personal and Public Involvement (PPI) is a statutory duty relating to the active involvement of service users, carers and the public in the:

- commissioning;
- planning;
- delivery;
- evaluation of services.

Personal and Public Involvement (PPI) operates from one to one care with individuals, to the development of services, policies and strategies. It is a process which empowers and equips people, giving them the opportunity to influence these decisions and plans. PPI can help to tailor services to need, help set priorities and improve quality and safety.

The goal for Health and Social Care organisations is to address both of these areas, ensuring that people have a good experience and also that they are meaningfully involved.

All resources are available to download from the Trust's website @ <http://www.southerntrust.hscni.net/about/1600.htm>

and from SharePoint

<http://sharepoint/oppc/uicd/PersonalandPublicInvolvement/SitePages/Home.aspx>

Standard Five– Measuring Outcome

HSC organisations will measure the impact and evaluate the outcome of PPI activity

In line with the regional PPI Standards key performance indicators, the Trust:

- ✓ **Evidences service user and carer involvement in the monitoring and evaluation of PPI activity**
- ✓ **Demonstrates through its annual report:**
 1. **How the needs and values of individuals and their families have been taken into account in the development and delivery of care**
 2. **The outcomes and impact achieved by using PPI approaches in respect of policy, investments, decisions and service delivery across the organisation**

Service user and carer involvement in PPI monitoring and evaluation

The **PPI Panel** consists of **14 service users** and **carers** across all programmes of care, Trust localities and Section 75 groupings and provides feedback on how the Trust is progressing its PPI agenda. It also works with the Trust to enhance PPI across all of its services. Trust staff from across the programmes of care have attended PPI Panel meetings to provide progress up-dates on PPI within their area of responsibility. All PPI action plans, progress reports, resources and training are discussed with and approved by the PPI Panel. The PPI Panel is also involved in the annual PHA PPI monitoring process overseeing the completion of the self-audit questionnaire and participating in the verification visit.

Four PPI Panel members have **full voting rights** of the **Patient Client Experience Committee (PCEC)** which is responsible for leading the co-ordination, development, implementation and monitoring of the Trust's PPI Action Plan across the organisation as well as the Patient Client Experience Standards and Complaints and Compliments.

The **Mental Health User and Carer Service Improvement Group (UCSIG)** consists of service users, carers, and independent mental health user and carer advocates (NIAMH, CAUSE) and mental health staff. This group seeks to shape and improve the quality and delivery of mental health services within the Southern Trust. UCSIG has representation on a range of strategic fora including: Trust Carers Reference Group, Recovery Steering Group, Support and Recovery Governance Forum and ImROC x 3 Sub-Groups, PPI Panel and the Mental Health Senior Management Group. The Divisional PPI Action Plan is signed off by the group and progress monitored at each meeting.

There are six places available for carers on the Trust's **Carers Reference Group**. This group oversees the development and implementation of the Trust's Carer's Action Plan and influences how the Trust plans, delivers, monitors and evaluates carer support.

Equality Screening - In addition to involvement in developing, all completed Equality Screening forms are available to view on the Trust's website at: <http://www.southerntrust.hscni.net/about/Publications.htm>



Further examples of service user and carer involvement in PPI monitoring and evaluation are contained within other sections of this report.

Standard Five– Measuring Outcome

HSC organisations will measure the impact and evaluate the outcome of PPI activity

Taking the needs and values of individuals and their families into account in the development and delivery of care

Patient Client Experience Programme

Patient experience is recognised as a key element in the delivery of quality healthcare. The PCE Programme is one method employed by the Trust to determine patient and service user priorities and ensure these are reflected in the Trust and directorate specific annual work plans. The PCE Steering Group coordinates the programme and ensures that best practice and learning is disseminated across the Trust and that the actions and work plans inform other Trust activities such as PPI initiatives and actions, Serious Adverse Incident reviews, complaint processes and regional work plans.



What we did

During 2016/17 the PCEC Steering Group progressed work to address the regional PCE priorities, continued with the collection of patient and client stories through the use of 10,000 Voices surveys as agreed by the Regional PCE Steering Group and those identified as Southern Trust priorities.

Regional PCE priorities 2016/17

- Reduce noise at night in hospital wards
- Raise the profile of #Hellomynameis
- Monitor availability of meals and drinks in the Emergency Department
- Sustain improvements in relation to mixed gender accommodation in hospital wards
- Increase uptake of PHA Biennial survey by 40% in areas of low participation by March 2018

10,000 Voices Surveys 2016/17

10,000 Voices is a regional initiative where patient views are gathered on the services they have Received, measured against the five patient client experience standards to inform future commissioning priorities. It gives people an opportunity to highlight anything important, such as what they particularly liked or disliked about their experience

- Paediatric, Autism and CAMHS concluded 30/6/16. 87 stories completed
- Unplanned Care story collection phase 2 concluded. 191 stories completed
- Adult safeguarding processes pilot completed. Focus period of story collection commenced March 2017 [10K Voices Adult Safeguarding](#)
- Eye Care Services focus period of story collection commenced March 2017 [10K Voices Eyecare services](#)
- Discharge from hospital stakeholder workshop to develop survey tool held November 2016. Pilot phase completed March 2017. Focus period of story collection due to commence June 2017
- Dementia Care project to focus initially on delirium. Pilot phase commenced March 2017. Focus period of story collection due to commence July 2017
- Staff stories - [10KVoicesStaffExperience](#)
- To date 45 stories completed and findings integrated into the specific work streams above
- Northern Ireland Ambulance Service - if your experience relates to the Northern Ireland Ambulance Service please click here: [10KNIAS](#)
- Health and Social Care in NI - if you have had any other kind of experience within Health and Social care and wish to share your story please click here: [10 Health and Social Care in NI](#)

Standard Five– Measuring Outcome

HSC organisations will measure the impact and evaluate the outcome of PPI activity

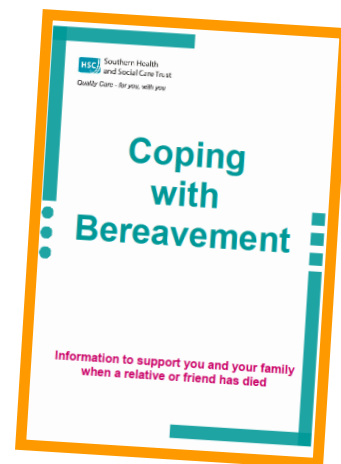
Southern Trust priorities 2016/17

Each directorate identified 5 improvement programmes to progress under patient client experience:

<p style="text-align: center;"><u>Acute Directorate</u></p> <ul style="list-style-type: none"> • Coping with Bereavement Booklet • Medical Ward information leaflet • Surgery Emergency Ambulatory Care Unit • Cancer Services Awareness event • Community Postnatal Clinic 	<p style="text-align: center;"><u>Older People and Primary Care</u></p> <ul style="list-style-type: none"> • Storage & distribution of continence products • Palliative Care Services Leaflet • Outcome focussed practice in Day Care pilot • Outcome based Domiciliary Care model • Enhance wellbeing of adults with learning disability during transition
<p style="text-align: center;"><u>Children and Young People's Services</u></p> <ul style="list-style-type: none"> • Improving the quality and timeliness of process • Implement Mind of My Own (MOMO) App for Looked After Children • Experience of Gateway Services • Safety in Partnership in Family Support Services • Yoga for Looked After Children 	<p style="text-align: center;"><u>Mental Health and Disability</u></p> <ul style="list-style-type: none"> • Low level psychological therapies and activities • Physical Health Monitoring clinics for severely mentally ill (SMI) patients in care • Independent Nurse Prescribing Clinics for dementia • Carers contact database in Physical Disability (AD pilot) • Involvement in transition planning in Physical Disability (Armagh pilot)

What Difference Did it Make?

The **Bereavement Forum** worked in partnership with the Palliative Care Experience Group to review and re-design a bereavement booklet to support local families following the death of a relative or friend. This booklet provides information on a range of matters including practical issues, coping with grief, supporting dependents and accessing local support services. The involvement of the Palliative Care Experience Group ensured that these booklets meet the actual, rather than the perceived needs, of the public during these periods of crisis. The Group was also involved in the design and development of a satisfaction survey, which is issued along with the booklet. This survey allows those who have recently experienced a bereavement to share their views on the care and support they received and indeed the actual booklet itself. These booklets have also been translated into a range of languages to meet the needs of people from BME communities and are available on the Trust website: <http://www.southerntrust.hscni.net/services/2397.htm>



Medical Ward information leaflet



In December 2016 the **Patient Support Service** approached the **PPI Panel** and asked for their comments and suggestions in relation to the development of **information placemats for patients** to provide practical advice and information in relation to admission and discharge and key points in a patient's journey. This will ensure that patients and their carers are better informed resulting in higher levels of satisfaction and a reduction in complaints. The placemats also provide advice to patients and carers on how to make a comment / complaint or become more involved in the planning, delivery and evaluation of services.

Standard Five– Measuring Outcome

HSC organisations will measure the impact and evaluate the outcome of PPI activity

What Difference Did it Make?

Surgery Emergency Ambulatory Care Unit

This improvement initiative supports service users meeting specific criteria, to be promptly discharged from the Emergency Department (ED) with the understanding they will be called to a designated surgical clinic at a later stage for further treatment / investigation.

The rationale behind this initiative is that it will:

- **Reduce the amount of time service users spend in hospital waiting for investigations to be conducted**
- **Improve service user experience of care as they will be treated in the interim in the relaxed environment of their own home**
- **Support a faster admission to a hospital bed for those who do need to be admitted directly from ED**

Prior to designing and implementing the initiative staff engaged with potential users to discover their views on the proposed approach and support them in identifying potential difficulties, stressors and barriers. During the pilot, service users were also asked to complete a questionnaire to determine their views and experiences in relation to the approach.

Between December 2016 and March 2017, **Cancer Services** worked in partnership with the Cancer User and Carer group on a number of projects including the review and redesign of Cancer Multi Disciplinary Team Patient Information service leaflets; the development and promotion of a 'Staff Signposting Guide to Cancer Support Services' which was part of a Trust Quality Improvement Initiative; the dissemination of a service user / carer survey seeking feedback on the Macmillan Information Centre as part of a Quality Environment Mark and as part of a peer view of Cancer MDT's and local action plans. The impact of service users and carers in the planning, development, delivery and evaluation of these projects has resulted in a more flexible and responsive service meeting the needs of users and the retention of the Quality Environment Mark for the Macmillan Information Centre.



Community Postnatal Clinic

This initiative seeks to improve postnatal care for women by identifying what works best for them and providing a range of alternatives. It seeks to increase choice by offering new mothers the option of attending a community postnatal clinic at a time that suits them rather than waiting at home for a mid-wife to call. Before designing and piloting this initiative, staff engaged with a sample of potential users to discover their views on the proposed approach and to determine demand for the community clinics. During the pilot, service users were also asked to complete a short questionnaire to determine their views and experiences of the community clinics. The feedback from the pilot is currently being collated and will be used to influence and shape future service provision.

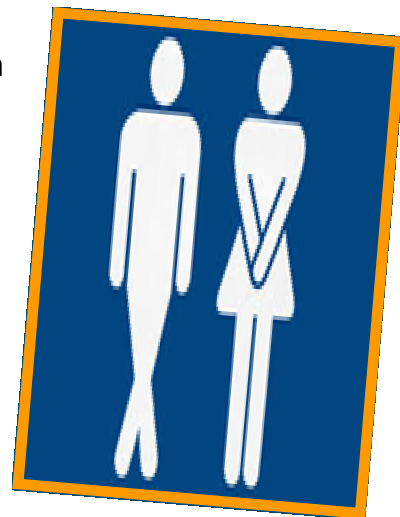
Standard Five– Measuring Outcome

HSC organisations will measure the impact and evaluate the outcome of PPI activity

What Difference Did it Make?

Transforming Continence Service Implementation Group

This initiative seeks to improve choice, flexibility and dignity for clients who collect continence products from the SHSCT. It seeks to reduce the number of collections clients have to make each year, with the products being provided in locations that adhere to disability access requirements, thus improving the safety of clients, carers and staff. Throughout the month of June 2016, Trust representatives hosted a number of focus groups with service users to gather information about their experiences of the Continence Service. These focus groups provided service users with the opportunity to become more involved in managing their own health care and identify a range of issues including accessibility. For the Trust this information will be used to drive quality improvement and ensure that our services retain a patient centred focus and improve the service by gathering information around their perceptions of the continence service.



Palliative Care Services Leaflet

This improvement initiative enables patients and those important to them to develop a better understanding of the role of the Community Specialist Palliative Care Team and also supports team members with the verbal communication of their roles. The **Patient and Carer Information Leaflet** was developed by the team in partnership with the Palliative Care Experience Group. Patient and carer views relating to the new leaflet and the service in general were gathered via a satisfaction survey and all complaints received throughout the year were monitored to determine if lack of information about the service or patient understanding were the cause of the complaint.



Outcome focussed practice in Day Care Pilot

This improvement initiative seeks to enhance service users experience of day care by developing appropriate referrals to short-term therapeutic activities in the community. It is believed this approach will empower service users to access further relevant opportunities in the community. Patient and carer views relating to this new person centred led programme were captured using the SenseMaker methodology and via a number of focus groups. Staff also undertook an audit of Care Plan files by reviewing information to ensure that all decisions were made based on individual needs. The pilot is currently being monitored and evaluated and the information gathered will be used to ensure that the service retains a patient centred focus.



Standard Five– Measuring Outcome

HSC organisations will measure the impact and evaluate the outcome of PPI activity

What Difference Did it Make?

Outcome based Domiciliary Care model



Older people tell us that they would prefer to remain independently in their own homes for as long as possible. Domiciliary Care is one of the services we provide to enable people do just that. Historically the domiciliary care budget within the Southern Trust was overspent and the Trust struggled to meet the growing demand for this service. There were a number of issues with the current service model, including time for task, a lack of timely reviews, creation of dependency and the service was not flexible enough to respond to individual or emerging need. A Domiciliary Care Worker remarked **“Where we are needed in a house we feel valued”** which implied that there were opportunities to tailor the service further.

Recognising that all stakeholders had valuable experience and knowledge of the service and came with diverse perspectives and legitimate concerns in regard to change and what that would entail, work commenced to identify a better service approach. This approach allowed for a greater focus on quality and efficiency involving those who currently use the service, their carers, staff who deliver the service, their managers and staff. Work included establishing a baseline picture, agreeing criteria, introducing new roles and ways of working, identifying a pilot area, providing training for staff and developing an effective communications plan. The pilot ran from the June 2016 to December 2016 in the Armagh & Dungannon Locality and the evaluation highlighted the following impact:

Improved service user experience, confidence in and quality of service

- 93% of service users (30) believed the new approach met their assessed needs
- 66.6% of service users believed the time the care worker spent with them was adequate and did not feel rushed - a concern which they had consistently raised by under the previous model
- 73.3% of service users had met with the Domiciliary Care Supervisor and this increased their confidence in the service while giving assurance that supervision was taking place
- 350 care workers received new ‘Promoting Independence’ training
- Happier staff and clients - no complaints and positive feedback

Increased capacity and efficiency

- 227 referrals were made to the new Homecare OT - 207 received an assessment
- 3617 hours were released creating capacity to accept new care packages and meet increased need
- 166 new clients, requiring a care package, were accepted during the 6 month period
- 204 hospital discharges were accepted
- 2646 additional hours were put into meeting service user changing care needs

Moving forward

- Criteria has been developed to move clients to Independent Sector Domiciliary Care Services once potential has been maximised
- Plans to roll out to the two other locality areas
- Quality and efficiency will remain the focus

Standard Five– Measuring Outcome

HSC organisations will measure the impact and evaluate the outcome of PPI activity

What Difference Did it Make?

Enhance wellbeing of adults with learning disability during transition

In November 2016 the Adult Disability Transition Team held an event at Armagh City Hotel to seek the views of carers regarding Trust Transition services for young people with a learning disability.

Presentations were delivered on proposed services and a range of stands from outside providers were on show. Focus groups were held whereby carers were asked to highlight what works for them and how the service can be more responsive.

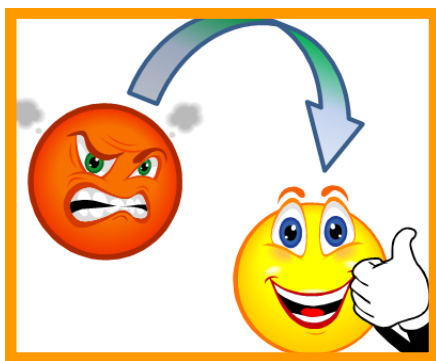
A number of ideas were generated which will be considered by the Trust including linking parents into the carer forum and bolstering informal peer support which was identified as the strongly preferred option of those present. Some parents also expressed an interest in being involved in co-producing information about services.

In January 2017 the PWB Team and Transition Service delivered a **5 week Take 5 Programme** for young people and their carers. A total of 10 people participated (5 parents and 5 young people) **WEMWBS** (a standardised tool for measuring wellbeing) indicated this increased significantly for participants at the end of the programme. Also Take 5 literature is being disseminated through the Transition Teams and individual service user wellbeing plans are being developed using the Take 5 themes.

Improving the quality and timeliness of complaints process

The aim of this project was to review and improve the existing process and to explore the potential to create a new system in Children and Young People's Services. Obtaining feedback from services users was central to the project. In total 132 service users were contacted and 25 (18.9%) responded.

As a result:



- The overall number of days taken to provide a formal response to complaints has improved
- Staff understand the need to follow a fixed process and are more aware of their roles and responsibilities and the importance of complaints
- “Cultural change” in the management of complaints by staff
- Feedback from service users demonstrates that the time taken in providing a response to their complaint is not as important as providing a response that addresses their concerns

Further information is available from: Francesca.leyden@southerntrust.hscni.net

Implement Mind of My Own (MOMO) App for Looked After Children

This improvement initiative sought to use an ‘app’ to encourage young people to provide feedback on their health, education, emotional wellbeing and care arrangements. However this was not progressed as both the young people and the staff felt that there were too many technical difficulties and preferred to use traditional forms of engagement and involvement.

Standard Five– Measuring Outcome

HSC organisations will measure the impact and evaluate the outcome of PPI activity

What Difference Did it Make?

Experience of Gateway Services

The Gateway Service in the Southern Health and Social Care Trust (SHSCT) engaged with service users to obtain feedback about their experience of the service - a service which is the first point of contact for family support and safeguarding.

The outcome is a First Contact Quality Framework, which sets out quality standards for Gateway, and will be implemented to improve the service user experience.

Further information is available from **Claire Fulton**, Children's Services Improvement Co-ordinator Tel: **028 3833 3747**



Safety in Partnership

Safety in Partnership uses a strengths based approach with families and young people who have experience of being involved with social services. The main emphasis is on children's safety and welfare while recognising strengths within families and other support systems.

This approach assists social workers in keeping children safe while ensuring that parents are fully involved in the process and facilitated to express their views. Parental and carer feedback within the Southern Trust has strongly validated this model as feedback demonstrated they felt listened to and fully included in the decision making process as well as increasing their understanding of social services' concerns around their children. Staff also felt this model helped improve working relationships between users and social work staff.

Yoga for Looked After Children

This unique programme has been designed to motivate and support young people with complex needs to reduce stress, improve their body language and self-esteem and avoid rumination of thought.

The Therapeutic/Specialist Yoga pilot programme was made possible by additional funding secured from the PHA and coordinated through the PWB Youth Health Improvement Action Plan and 4 young people from residential care participated. This was a new experience for the young people and external issues tended to dictate the pace at which the sessions developed. However over the 10 weeks there was a positive response and the specialist psychologist is currently using the feedback to amend the programme for future use.



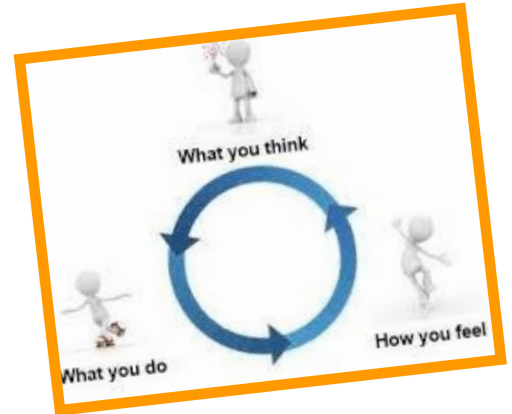
Standard Five– Measuring Outcome

HSC organisations will measure the impact and evaluate the outcome of PPI activity

What Difference Did it Make?

Low level psychological therapies and activities

This improvement initiative provides all Acute Mental Health in-patients access to daily one-to-one or group psychological therapies and all learning disability in-patients access to daily therapeutic activities. This initiative seeks to improve patients' motivation levels and help them to develop coping strategies and self management skills. Patients are also given an opportunity to evaluate their experience of the psychological therapies / therapeutic activities. Work is also ongoing to formally evaluate the impact of these interventions for patients as part of a research proposal.



Physical Health Monitoring clinics for Severely Mentally Ill (SMI) patients in secondary care

Recognising SMI patients, involved with secondary care services, are more likely to have poorer physical health outcomes and are less likely to avail of physical health monitoring, these clinics provide targeted cardio metabolic health monitoring; opportunities to discuss lifestyle choices; and signposting to relevant services. Every patient has the opportunity to provide feedback on their experience by completing a feedback form on exit from the clinic (this was developed with Mental Health Forum input) and this data will also be used to devise improvements in uptake.

Independent Nurse Prescribing Clinics for Dementia

Independent Nurse Prescribing Clinics for dementia have been established in each of the three localities from September 2016.

The clinics provide:

- Access to memory medicines in a timelier manner
- Monitoring of efficacy and side-effects of medications
- Support, advice and signposting to other services at an earlier stage
- Support for the person and their families to live well with dementia



Every patient has the opportunity to provide feedback on their experience of the clinic

Standard Five– Measuring Outcome

HSC organisations will measure the impact and evaluate the outcome of PPI activity

Carers contact database in Physical Disability (AD pilot)



Armagh & Dungannon Physical Disability Community Team are keeping in touch via an email and postal database, a method which was preferred by service users and carers. Staff are able to disseminate information and also gather user views about their service. Another survey was carried out in November and the results commended good practice (e.g. the vast majority of respondents felt that they were listened to and generally received information which met their needs.) Results also flagged up areas for development such as improving communications through use of mobile phones and ensuring that all carers have adequate time with staff.

Breast Cancer survey



How we engaged with you

In January 2017, the Breast Screening Team conducted an exit-poll survey to gather the views and experiences of service users attending Lurgan hospital and the Dromalane site in Newry. With service uptake being strongly linked to levels of satisfaction, the team were keen to discover what users thought of:

- The written information provided along with their appointment letter
- The facilities in which their screenings were conducted
- The attitude and approach of Trust staff

What You Told Us

Two hundred service users completed the survey which was structured in a manner that took into account the needs of harder to reach groups such as people from BME communities. The survey revealed that:

- 95% of service users thought that the written information provided along with their appointment letter was excellent
- 99% of service users believed that staff's attitude and behaviour was excellent
- 99% of service users believed that the cleanliness and tidiness of screening facilities was excellent
- In 96% of appointments the radiographer introduced themselves to the service user thereby confirming high levels of compliance with the 'Hello my name is..' campaign

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What Needed Improved?

As well as providing this positive feedback the service users also identified a number of areas for Improvement including:

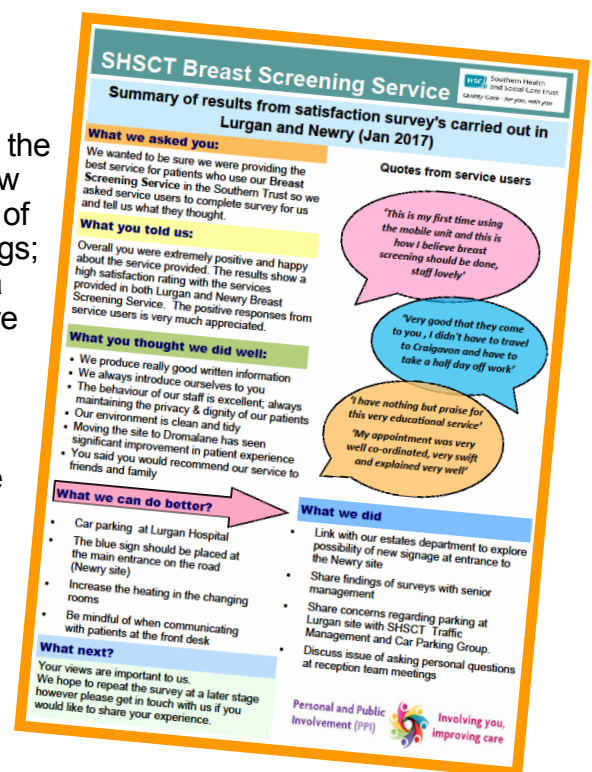
- **Car parking at Lurgan hospital**
- **Entrance signage to the Dromalane site, Newry**
- **Warmer changing rooms**
- **Staff being more discreet when communicating with service users in the reception area**

What We Did

In response to these issues the Breast Screening Service has raised the car parking concerns with the SHSCT Traffic Management and Car Parking Group; are currently liaising with the Estate Department and discussing the possibility of erecting new signage at the entrance to the Dromalane site; raised the issue of asking personal questions at the reception area in team meetings; shared the findings of the survey with senior management via a detailed report and service users via feedback posters which are currently displayed at both sites.

What Difference Did it Make?

The impact of this involvement is that staff are assured they are providing an excellent service which improves staff morale and at the same time ensures the service is more responsive to the needs and concerns of those who use it. The PPI feedback template will now be used as a standard mechanism for feedback in Breast Screening services.



Parkinson's Service

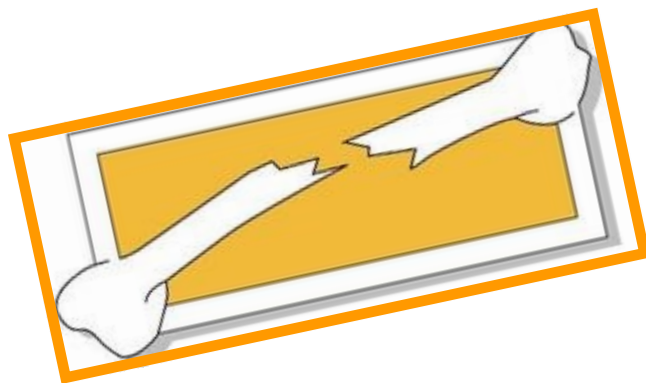
Staff from the Parkinson's Service used an exit survey to gather the views of service users and carers who attended one of its information sessions. These sessions are designed to support newly diagnosed patients and their carers. Staff were keen to ensure that those who attended felt better equipped to manage their long term condition or support those they care for. This involvement will also ensure that future information sessions will better meet the needs and expectations of service users and carers.

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Fracture Liaison Service

Staff from the Fracture Liaison Service developed a satisfaction survey to gather the views and experiences of service users and carers. As well as providing the opportunity to offer feedback on aspects of their own individual care, this survey also gathered information on specific issues including waiting times for assessment, distances travelled to the clinic and the demand for further information sessions. The information is currently being collated and going forward will be used to improve service user experience.



This has resulted in improved accessibility of assessment, reduced need for initial assessment where not required and promoted a greater understanding of the Young Carer agenda.

Young Carers Involved in improving services



Young Carers, Head of Service for Family Support and Safeguarding staff from the Trust's Social Work Training Unit, and Action For Children worked together to improve accessibility of assessment and support to meet identified need.

- a new referral pathway has been agreed. Assessment is now completed via Action for Children and quality assured by the Trust's Gate Way Team
- the design and delivery of training across multi-disciplinary professionals has improved their understanding of Young Carers, their issues and the new referral pathway
- Young Carers contribute to the quarterly agenda for Young Carers to ensure that it is in keeping with their needs and priorities

Family Support Worker and Parent Video - Children with Disabilities Team Newry & Mourne

This video was made in order to highlight the nature of support available from the Family Support Worker service in Newry and Mourne. This exercise has resulted in making staff as well as the general public more aware of this service. Families involved were able to share their stories with other families and staff, thus increasing all round knowledge regarding the experience of, and help available to parents of children with disabilities.



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How PPI has influenced and/or informed policy, investments, decisions and service delivery across the Southern Trust.

Acute Services

The proposed **Redevelopment of Craigavon Area Hospital** represents the biggest capital build project undertaken by the Southern Health and Social Care Trust and service users and carers have been involved in the process from the outset. Satisfaction questionnaires, seeking the views of service users and carers, were reviewed by the **PPI Panel** and piloted in August 2016. Learning from the pilot shaped the final version of the questionnaire and the project team then rolled out the survey across the site seeking to engage with as many, and as a diverse, range of service users as possible.



As well as providing service users and carers with the opportunity to influence the redevelopment of the hospital this level of involvement will ensure that the Trust continues to place the diverse and wide ranging needs of the local community at the heart of everything it does.

Designing new Paediatric Centres - Working with parents and children

Parents' and Children's' views were central to the interior design of new paediatric centres at Daisy Hill Hospital and Craigavon Area Hospital. 'Harvey's Corner' was co-designed by parents, staff and the play therapist.

Parents views have been sought via questionnaires on discharge and through involvement with the Regional Parental engagement group.

Daisy Hill Hospital Pathfinder Project



During 2016/17 the Trust became concerned about the sustainability of Emergency Department (ED) services at both Craigavon Area Hospital (CAH) & Daisy Hill Hospital (DHH). This concern reflected ongoing difficulties in the recruitment and retention of suitably qualified and competent staff. Despite best efforts the Trust has not been successful in securing a sustainable solution to this difficulty. The Trust believes therefore that in the absence of appropriate cover in DHH between the hours of 8pm and 8am the service has the potential to be unsafe.

Following representation from Southern and other Trusts facing similar concerns in their areas, the Department of Health (DoH) agreed an interim short term solution for a period of 18 months. It was recognised that a long term sustainable solution was required and the DoH agreed to provide guidance to the Trust on establishing a clinically-led, managerially supported pathfinder project to develop an operational model for a long term ED service model for the Newry and Mourne area with identification of regional learning. The pathfinder model is to include public engagement in line with PPI/co-production informed by local and regional PPI fora. Dr Anne Marie Telford has been appointed as DHH Pathfinder Project Manager and she will be working with the Trust and local community and voluntary representatives over the summer months to establish a framework to develop the model and ensure the voice of service users and carers through co-production and co-design in planning for future emergency care services to meet the needs of the people of the Newry and Mourne area.



Further information is available on the Trust website at:

<http://www.southerntrust.hscni.net/about/3695.htm>

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Older People and Primary Care Directorate

Carer Support Stakeholder Consultation

On Wednesday 1st of March Trust representatives facilitated a stakeholder consultation in the Seagoe Parish Centre, Portadown to discuss the way forward for generic adult carer support in the Southern Trust area. The Trust outlined the current position with regard to carer support services and summarised the issues raised through a pre-consultation questionnaire. Those present were given time to consider the information provided and respond to some questions regarding the priorities for adult care support and who is best placed to deliver this. The event was well attended event by carers, potential providers and others with an interest in carer support. The constructive feedback was used to inform the way forward.



A report of the event is available on the Trust website.

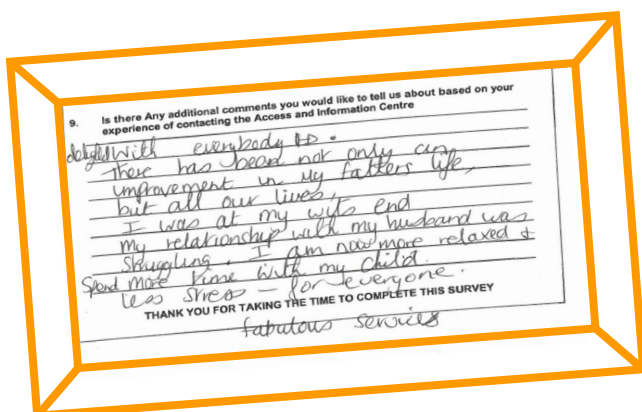
Young Women's Stroke Group

The Assistant Director for Enhanced Services engaged with representatives of the Young Women's Stroke Group and secured their involvement in the delivery of Awareness Training to GP's and Nursing Staff from the Out of Hours Service. This training will focus on the signs and symptoms of stroke in young women, and the participant's involvement will ensure that Trust representatives have a greater understanding of their patient's needs and fears. This involvement will also empowered local young women and enhance care provision by the Community Stroke Team.

Stroke Service

Stroke Service staff completed a survey with a random sample of service users to gather views on their overall experience of the care provided. This feedback is currently being analysed and will be used in the future to bring about improvements to the service.

Physiotherapy Musculoskeletal Outpatient - Service Patient Experience Survey 2016



Staff from the Outpatient Service collated the views and experiences of service users and carers. As well as offering them the opportunity to provide positive feedback about aspects of their individual care, this survey also allowed service users to flag up concerns about privacy, waiting lists and car parking issues. These views have been taken on board and actions are being developed that will improve the overall experience of the Outpatient Service.

Standard Five– Measuring Outcome

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Adult Epilepsy Self – Management Programme

Staff from the Epilepsy Service worked in partnership with service users, carers and family members to deliver and evaluate a self - management programme in April 2016. This programme ensured that service users were more confident and knowledgeable about managing their condition and overall had a better experience of the engaging with the Trust. From an organisational perspective this programme led to a reduction in clinic appointments and Emergency Department attendances, and ensured that those service users that required a higher level of support could access it in a more timely manner. Finally this programme also ensured that carers and family members also had a greater understanding of the condition allowing them to offer more appropriate levels of support.

Podiatry Service

Podiatry Service recently sought the views of the PPI Panel when developing a service user questionnaire relating to the centralisation of clinics and the introduction of services at evenings and weekends. The service was keen to ensure that the questions were clear, straightforward and jargon free. The Podiatry Service has also recently developed a range of service user leaflets providing information on the mostly commonly encountered podiatric conditions, thereby ensuring that they are better informed and able to manage their condition.

Access and Information

The Team complete feedback questionnaires (on a weekly basis) with those who use the A&I service. Each caller is asked nine questions including:- the type of help wanted from the service, rating the knowledge of the person who gave you the information, was it helpful, and if not why not; as a result of the service has there been any improvement in your health or quality of life.

This Information is then collated and a communication sub group within A&I team meet every six weeks to read and review the comments and take these on board. Both positive and negative information is fed back to the wider team either through weekly team briefs or staff meetings and a entire team approach to learning and sharing from this feedback is used to shape our frontline service delivery.

Some recent positive comments include: ***“really brilliant service, helped my mum cope at home with her husband by being able to be signposted to the right service for advice”***

“ Very happy with contact from A&I, got a call a few days later from OT to arrange a visit so very pleased...thank- you”,

Feedback has changed the way we do things, for example, A&I staff discussing support services on the telephone with the older person and then following this up by posting out the information and contact numbers allows older people time to consider and reflect on the information. This approach has resulted in minimised call backs to the service for wrong numbers or going over something again.

Furthermore, we have developed the A&I Directory of community and voluntary organisations across SHSCT area and are currently developing a bespoke spreadsheet of specialist services. This is in response to callers requesting, for example, help with hedge-cutting, dog sitting to attend hospital appointments, help with hoarding i.e. non- traditional H&SC services and this has changed and shaped the way we do things to meet the ever changing needs of an ageing population where older people matter.

HSC Southern Health and Social Care Trust
Quality Care - for you, with you

Access and Information Service

Are you over 65?

Find out more about:

- ✓ Local Events and Social Activities in your area
- ✓ Services and resources available to support you to live independently
- ✓ Advice, support and guidance on aspects of daily living.

Living well, supporting YOU, renewing confidence and independence as you get older

T: 028 3756 4300
E: access.information@southerntrust.hscni.net

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Mental Health & Disability Directorate

My Day My Way - DVD launch

Service users were involved in the co-production of a DVD and poster campaign which aims to show the range of day opportunities available to people with a learning disability, and highlights that their wishes need to be at the centre of this. Service users have also played an active role in collating a newsletter on day opportunities, including providing photography and other content.



Service Users with Physical and Sensory Disabilities

Service Users with Physical and Sensory Disabilities have long enjoyed the Fit4U programme which promotes active lifestyles. Now people with Learning Disabilities can avail of the expanded Programme - known as Fit4U2.

The service is currently planning how best to include all service user views in ensuring the high level of activity continues to meet users' needs. Users and Carers will be asked how their views can best be taken on board, and there will be an opportunity for representation on the project steering group, with support. Service Users will be asked their views on the structure of the steering group, and how they would like to be represented at this level to help guide the direction of the project.



Minister Launches Recovery College - Former Health Minister Michelle O'Neill called the Recovery College:

“a fresh approach to developing and sustaining mental health recovery, and this is at the heart my plans to champion mental health.”



The Recovery College uses an educational approach to help people recognise and develop their personal resourcefulness and awareness in order to become experts in their own self-care, make informed choices and do the things they want to in life. Service users were involved in setting up the college and information has been disseminated through the Mental Health User and Carer Service Improvement Group.

A prospectus for the college and other Information is available at:

http://www.southerntrust.hscni.net/pdf/Recovery_College_Prospectus.pdf

Standard Five - Measuring Outcome

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Conditions Management Service User Group

Conditions Management Service User Group has had an input to a range of regional policies, including evaluation and marketing. Members have gone on to access advocacy training, and to consider paid employment or further training, and the group is hoping to renew its membership. Their work has demonstrated some of the practical challenges in delivering PPI such as the time limited involvement of clients on the programme (i.e. 12 weeks) as we need to engage with clients over a period that allows them time to develop the confidence, knowledge and skills to make a meaningful contribution and some unforeseen challenges, namely the conflict between confidentiality and service user's statutory right for involvement in service development and in trying to get agreement on the means and levels of user involvement where different staff and different Trusts are at different places in their thinking and their practice.



Further information on the Conditions Management Programme is available at:

<http://www.southerntrust.hscni.net/services/1714.htm>

Regional Self Harm Reference Group

Two service users have been supported to attend this group. They are currently having an input into regional discussion on a quarterly basis. This activity enables concerns and ideas to be brought from the Southern Trust area and information to be fed back and disseminated.

Learning Disability Carer's Forum

This Forum remains a strong influence in the development of services for individuals with a Learning Disability. Members of the Carers Forum have been involved in standardising bed based short break provision (respite) eligibility which included carrying out an options appraisal for short breaks and developing a scoring tool to help determine the amount of short break eligibility. All carers of individuals with a Learning Disability have now been informed of the proposed model for bed based short breaks. This piece of work is now due to out for tender to provide the new service.

The Carers Forum meets monthly and receives regular updates on short breaks, day opportunities and transition. The group has also been involved in selecting an organisation to carry out an evaluation, to help shape their future direction.

An evaluation of the Forum is in the process of being carried out to see how improvements can be developed and implemented. One development already agreed upon has been the need for a newsletter to ensure good communication of information in a timely manner. The Forum members hope that by so doing, they can avoid rumours in relation to service change dominating the discourse at Forum meetings.

Carers have also recently been involved in a work shop to help determine future spend for improving services to older carers of individuals with a Learning Disability. They have also been involved in the selection of an organisation to provide awareness training for carers on rights and entitlement.

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Children & Young People's Directorate

Young people with experience of the care system influence service and strategy development



Representatives from a Service User Group for young people within the Southern Trust have been involved in a venture run by the Youth Social Enterprise Project which is a HSC pilot programme in conjunction with the Department of Health.

Through direct engagement with young people, consultation with stakeholders and research, the project has developed four business ideas which have been taken to proof of concept. The strongest business idea out of the four will be identified and will proceed to full business plan. This has been progressed in consultation with the H&SCB and a steering group has been established. The programme aims to enable young people to become self sufficient through the option of self employment, and the young people involved with this programme are already developing skills which will be useful to them in the future.

Health Visitors

Health Visitors are seeking the views of service users as part of their professional revalidation process. Developing from previous initiatives aimed at capturing user views, service users are being asked to comment on the content of a leaflet which will point out a range of ways for people to give their opinions. These include:

- Using the “We value your views” leaflet
- Taking part in audits
- Commenting in relation to revalidation of health visitor and public health staff nurses professional status
- Being involved in future changes to protocols or procedures

Views expressed by service users will be central to the evaluation and development of services, and will be an important part of staff development.



A number of children's' specialist services including the **Paediatric Rapid Response Team, Young People's Transition clinic (Diabetes and Behaviour Support Service)** have been reviewing their services and have been encouraged to engage with service users/patients and parents at the earliest opportunity. Staff have included parents and young people, where possible, in the design of surveys and questionnaires and in the establishment of adolescent / transition clinics within the diabetes services. Focus groups are also to provide 'richer', qualitative information which will help in thinking about how we deliver services and the types of services delivered. Staff are energised by the prospect of engaging in this way and have already seen the benefits of including users of services at the earliest opportunity.

Standard Five - Measuring Outcome

HSC organisations will measure the impact and evaluate the outcome of PPI activity

Our Lives, Our Voice' - Listening to looked after young people

The OLOV group has sought the views of care experienced young people, so that the Trust can better respond to their needs. A group for those aged 16+ has already made inroads by making suggestions for young peoples' contributions to LAC reviews. They also took part in the 2016 National Care Day event, changing the story/raising the profile of young people in care. Another group is being planned to meet the needs of young people aged 12-16 who are looked after by the Trust. The experience of the 16+ group members will be central to planning this group. The views of these young people will be important in shaping service development by the Trust.



Corporately

Contracts Review

The Southern Health and Social Care Trust has a long, productive history of working in partnership with a range of organisations in other sectors towards the long term goal of improving the health and wellbeing of the population of the Southern Area. This commitment has arisen from a combination of historical allocations, direct awards and a legacy of granting.

New strategic drivers including the current financial context, the legacy of Transforming Your Care and the emergence of new public procurement regulations have signalled the need for the Trust to undertake a fundamental review of the way in which it commissions services from the Community and Voluntary Sector for the future.

In progressing this review process in an open and transparent manner, the Trust held two separate workshops in April 2016. Currently contracted CVS providers were directly informed of the opportunity to attend and the events were also advertised in local press to encourage attendance from potential future providers who do not currently have a contractual arrangement for the provision of services with the Trust.

A total of 50 representatives from community and voluntary sector organisations, outside of Trust, Public Health Agency and the local council representative attended the events in Portadown and Newry. Assistant Directors across all programmes of care attended the event to inform and facilitate the engagement process and to record responses from participants.

Further to a brief opening presentation which set out the purpose and objectives of the review, participants were invited to consider and make comment on the draft criteria that the Trust had proposed to apply for the purposes of ensuring an equitable and transparent review process.

In addition to the facilitated workshops, participants were invited to complete individual comment forms which mirrored the questions asked at the facilitated workshop. A total of 8 completed comment forms were received. The feedback was used to shape the final review process and criteria which was then shared with directorates who commenced desk top reviews of all existing contracts. Once signed off, the review of the contracted service and management actions will be communicated to the Provider organisation at a review meeting and will be formally communicated in writing. The provider will have the right to appeal the evaluation.



Newry Workshop April 2016

Thanks



THANK YOU

This report has highlighted only some of the progress we have made over the past year, yet it also shows the great potential for making improvements to the experience of patients, carers and the wider public through involving and working in partnership with them to make our services more person-centred.

We would like to thank all those who have contributed to this report and to all involved in any of the PPI activity. This includes service users, carers, volunteers, the PPI Panel, Trust staff, community and voluntary organisations etc. For further information or support please contact the PPI Team at:

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Carolyn Agnew Tel: 028 3756 4469 Neil Gillan Tel: 028 3756 4471
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 Email: firstname.surname@southerntrust.hscni.net

Tell us what you think...

If you would like to comment on any issues raised by this report, please complete this form and return it to:

PPI Team
 St Luke's Hospital
 71 Loughgall Road
 ARMAGH
 BT61 7 NQ

You can also email us at: carolyn.agnew@southerntrust.hscni.net If you provide your contact details, we will acknowledge your comments and pass them to the appropriate departments for a response if need be.

Name _____

Address

Comment: