



Name of project: Are patients and carers at the heart of everything we do?

Project leads: Emily Bradford and the People's Network



Kent Community Health
NHS Foundation Trust

What was our aim? Why is it important to service users and carers? Ideas and tests of change

With 70 plus clinical services spread across Kent, Medway, London and East Sussex, getting patients and carers involved with what we do can be difficult. We decided to start small, looking first at our governance groups, to determine how much we are really focussing on the experience of our patients and carers. Our aim: to have 50 per cent of our governance groups effectively involving patients and carers by June 2023. We define 'effective' as a collective understanding of the role of Participation Partners (PPs), and our colleagues rating the impact of their involvement as beneficial to the group, service or trust.

As defined by the NHS Constitution, we should actively encourage feedback from the public, patients and staff, welcome it and use it to improve our services. As a trust, we must involve people and communities and feedback to them about how it has influenced activities and decisions. Several members of the People's Network sit on the governance groups that report into Quality Committee.

A few members of the network reported that their involvement in governance groups was tokenistic; they were asked to attend to meet the membership criteria, rather than having an active role sharing feedback, contributing ideas and developing the work of the group. One of the members suggested that we initiate a project to assess the impact of their involvement on the groups by asking both Participation Partners and colleagues about their perception of the impact of patient and carer involvement.

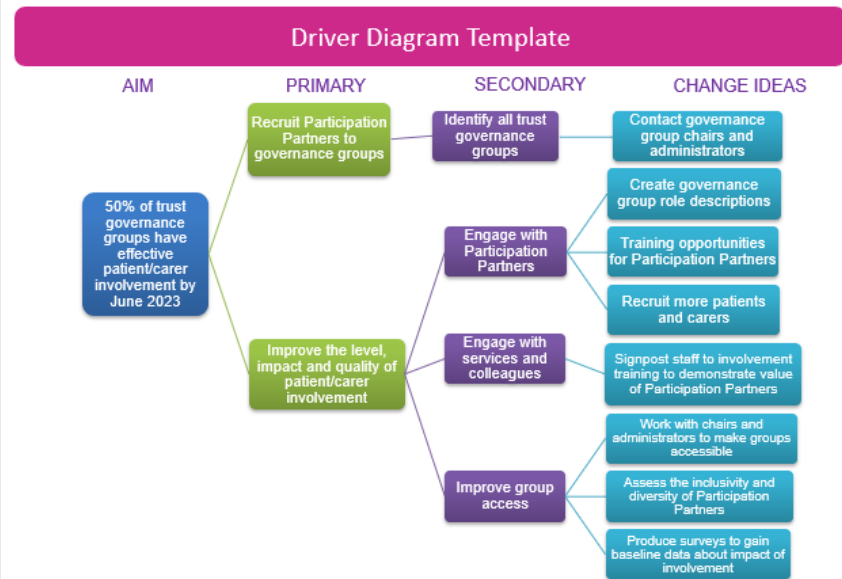
By introducing the project, we were able to engage closely with the chairs and members of the governance groups and undertake specific objectives identified within their feedback.

We identified four measures at the start of our project and addressed them by:

- Number of groups with patient involvement** – identifying the number of groups with patient/carer involvement (seven of 11). We are supporting group chairs to recruit more PPs.
- % or PPs who feel their involvement is valuable** – producing a survey for PPs who sit on governance groups. We asked: do you think your contribution is valued by the group? Answer options: really valued; somewhat valued; never valued.
- % of staff who understand and value the PP's role** - producing a survey for staff who sit on governance groups. We asked: how valuable/useful do you find the PP's involvement in the group? Answer options: really valuable; somewhat valuable; never valuable.
- Equality and diversity of PPs** – including survey questions that reflect the equality monitoring questions in patient experience surveys.

The two surveys will be released again at the end of the project to compare data against the four measures. Governance group role descriptions are being co-produced to define the roles and responsibilities of a Participation Partner. This will support the recruitment of new PPs and help staff to better understand the role of PPs attending.

The tools we used Results/How did we do/Anticipated outcome What we learned and what's next



Driver diagram
Survey-monkey
Role descriptions

Participation Partner role description

Role title	Patient and Carer Council member
Base/location (e.g. home, Trinity House)	Virtual (Microsoft Teams)
Governance group contact details	Co-chair: Ali Carruth, Director of Participation, Experience and Patient Engagement, ali.carruth@nhs.net Co-chair: Sarah Ansell, KCHFT Participation Partner Administrator: Julie Abberley, Business Administrator, julie.abberley@nhs.net , 01233 554901
Time commitment (including preparation and follow-up)	One hour of reading time to prepare for meeting. The meeting occurs once a month for one hour and 30 minutes.
Patient and Carer Partnership Team contact details	Email: kenichf.engagement@nhs.net Team phone: 0300 013 2045 Address: Patient and Carer Partnership Team, Kent Community Health NHS Foundation Trust, Trinity House, 110-120 Upper Pemberton, Kennington, Ashford TN25 4AZ
Tasks and responsibilities	The co-chair will: <ul style="list-style-type: none"> Plan the meeting agenda with the other co-chair and administrator Chair the meeting and manage the agenda and action log Hold services and action holders to account Make sure the patient's voice and views are heard The council member will: <ul style="list-style-type: none"> Use their experience and knowledge of NHS services to feedback on subjects discussed at the meeting Read documents relating to the agenda and offer feedback
Experience, skills and abilities	<ul style="list-style-type: none"> A keen interest in NHS community services and governance Experience of using NHS services as a patient, carer or family member Experience of attending and/or chairing meetings Basic computer skills (to use MS Teams and email) Good listening and communication skills Respect and maintain confidentiality Respect for others' opinions, beliefs and points of view Commitment to NHS values and local trust policies

Three months into the project, we have achieved some positive outcomes, including:

- Two PPs have been re-invited to virtual mortality reviews (this was paused during the pandemic). Engaging with the **Mortality Surveillance Group** helped the chair to identify this gap and the two PPs are re-engaged with this process.
- Another PP has been recruited to the **Patient and Carer Council**, helping to increase patient and carer membership, as detailed in the terms of reference.
- The **Patient Safety and Clinical Risk Group** has identified a new role for development within the group: Patient Safety Partners. This is a role that can be carried out by the current PPs that attend the group, and advertised to new Partners with a co-produced role description.
- Two **role descriptions** have been finalised for two governance groups, with six more in production.
- The **equality monitoring** questions in the survey for PPs identified a veteran. This individual will be approached for further involvement with the trust's objective to improve the patient experience of veterans and their families.
- The survey for colleagues was completed by those who attend other **groups and committees** and they have expressed an interest in engaging with the project. This will help to create more opportunities for PPs to take part in other groups and activities across the trust.

What we learned and what's next

As we are very much in the early stages of our project, our next steps are to engage with the chairs of other governance groups, releasing the survey to its members and co-producing a role description for each group.

So far, we have learned that we can easily achieve our objectives through collaboration with group leads and Participation Partners, with support from the Patient and Carer Partnership Team.

By the end of the project, we hope to see increased awareness about the impact patient and carer involvement can have and, in turn, an appreciation of how valuable this can be.

We will apply the methodology of this project to other services and projects across the trust, building on what we have achieved so far, and truly putting patients and carers at the heart of what we do.

Are you informed when and how your involvement has influenced a piece of work or a service?

