



AGENDA ITEM

3.2.7

CTM BOARD

HEALTH & CARE STANDARDS ANNUAL REPORT 2022

Date of meeting	24/11/2022
FOI Status	Open/Public
If closed please indicate reason	Not Applicable - Public Report
Prepared by	Becky Thomas, Senior Nurse, Quality Improvement Louise Mann, Assistant Director, Quality and Safety.
Presented by	Greg Dix, Executive Director of Nursing
Approving Executive Sponsor	Executive Director of Nursing
Report purpose	FOR NOTING

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)

Committee/Group/Individuals	Date	Outcome
Quality & Safety Committee	15/11/2022	NOTED

ACRONYMS

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1. SITUATION/BACKGROUND

Since 2009, the NHS in Wales has undertaken a national audit of care and service delivery which has included three elements:

- Patient Experience Survey – where we asked patients about their experiences of care.
- Operational – This included a retrospective examination of patient records to measure compliance against the standards and triangulation of information and observation of clinical practice.
- Staff Survey – where we asked staff about their experience of working within the Organisation.

The Health and Care Standards provide the framework for how services are organised, managed and delivered on a day-to-day basis. They establish a basis for improving the quality and safety of healthcare services by providing a framework against which standards of care can be measured and highlight focus areas for improvement.

The 22 Health and Care standards have been designed to fit with the seven quality themes identified in the NHS Outcomes and Delivery Framework which were developed through engagement with the public, patients, clinicians and stakeholders.

Each theme includes several standards which have been mapped against the NHS Outcomes and Delivery Framework measures, the measures relating to the fundamental aspects of care and specific areas that comply with legislation and guidance. The benefits of the engaging in the annual audit are:

Enables patients/carers to:

- Share their views and experiences on what we do well and where we need to improve, which will be used to help improve the services we provide.
- Have a voice in the quality of the care they receive.

Empowers staff to:

- Make a difference and ensure ownership of their practice.
- Have a voice in the care that they provide and ensure the focus is on essential elements of care and caring.
- Identify areas of good practice and highlight issues for concern.
- Develop action plans to monitor change.



Enables Organisations to:

- Have a mechanism to monitor/measure the quality of nursing care.
- Develop organisational policies and procedures.
- Identify key themes for improvement.
- Adopt a culture of openness and transparency with the quality standards.

2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

The findings from the 2022 Annual Health and Care Standards operational audits, patient survey and staff survey are presented in the attached detailed Health & Standards Annual report. The narrative of this report will focus on the areas of good practice identified by the operational audit, our patients and our staff, as well as attempting to recognise and explain any areas of concern that emerge from the findings. It is important to note that this audit report is a partial, specific view of health board performance and should be seen within the context of other health board data and broader system challenges.

When making comparisons to year-on-year results, it must be recognised that there are limitations in making summative comparisons as the number of areas undertaking the audit has increased year on year. In addition, it is important to note that there is no longer a requirement to submit the findings to the Chief Nursing Officer, where data from other Organisations is available. Therefore, the results should not be used to compare Organisations across Wales; it is more helpful to provide assurance information to our Board, our stakeholders, our colleagues and the patients and populations we serve.

3. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

3.1 Feedback from our population

Between 1st April 2022 and 30th June 2022, a total of **646** patient experience surveys were completed across the participating clinical areas. This is compared with the **1,307** surveys completed in 2019. **444** (69%) were completed by the patient/service user, **62** (10%) by a friend/ family/carer and 54 (8%) completed with the support of a Healthcare Professional.

Feedback from patients confirms the high standards of care provided across the Health Board with an overall satisfaction rate of 90% albeit a slight decrease to the 93% achieved last year. They are also complimentary towards

the attitude and behaviour of staff and nearly all patients (99%) who participated in this year's audit felt that they had been 'always' or 'usually' treated with dignity and respect during their stay or attendance to hospital.

There are two low scores this year, the first relating to the ability to speak Welsh to staff if needed with an overall patient satisfaction rate of 86% however it's heartening to see an increase on last year's 77%.

The second was related to getting enough sleep and rest, with a score of 88% a slight increase from last year's 86%. Sleep and rest in our hospitals is a continual challenge for us and we need to continue to think creatively on how we can improve this experience for our patients.

3.2 Feedback from our staff

Feedback from staff remains low overall and sees a decrease this year to an overall satisfaction rate of 67% in comparison to last year's 78%. This could be in part attributable to the unprecedented pressures staff have experience over the last two years with the pandemic. However, we must be mindful not to make assumptions and some significant work needs to take place to understand more fully the responses provided by staff

The 3 elements that received the lowest score were:

1. Make you feel a valued member of the organisation and have a sense of belonging (55%) a stark decrease to last year's 78%, some work needs to be undertaken to understand this further
2. Make you feel safe at work (62%) a reduction on last year's 82%
3. Make you feel proud to be a nurse / allied health professional (60%)
Whilst this score keeps us in an AMBER position it must be noted that it's a worrying decrease of 22% from last year's 82%.

There is considerable activity in respect of promoting staff wellbeing within the Health Board however it must be acknowledged that those whom replied to this survey report a concerning reduction in feeling valued, safe and feeling less connected to their profession. This apparent loss of morale can potentially have an impact on the quality of care delivered to our patients.

3.3 Operational Audit findings

The operational audit findings have confirmed a top 3 key areas of good practice and areas where improvements could be made.

Top 3 areas of good practice

1. Ongoing successful implementation of the Welsh Nursing Care Record
2. Introduction of a standardised Virtual Visiting service
3. Implementation of Safe to Start across sites

Top 3 areas for improvement

1. **Safe Care** – How will we ensure good patient hydration.
2. **Dignified Care** – How will we improve the environment of care for patients and their families. For example, providing privacy for patients and their relatives during visiting.
3. **Individual Care** – How will we improve the assessment and care of patients experiencing delirium and those patients who have a diagnosed learning disability.

This learning will be shared within the Listening and Learning Forum, added to the Learning Repository and specific improvement requirements subject to further analysis, action planning and outcome monitoring. The planned Ward Assurance Programme will also provide assurance of 100% compliance with the health care standards for future confidence on the quality, safety and effectiveness of our services.

4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	Yes (Please see detail below)
	Patient care and staff experiences
Related Health and Care standard(s)	Safe Care
	All Health care standards affected



Equality impact assessment completed	Not required
Legal implications / impact	There are no specific legal implications related to the activity outlined in this report.
Resource (Capital/Revenue £/Workforce) implications / Impact	There is no direct impact on resources as a result of the activity outlined in this report.
Link to Strategic Well-being Objectives	Provide high quality, evidence based, and accessible care

5. RECOMMENDATION

The Board is asked to:

- **NOTE** the position of the Health Board with regard to the Health & Care Standards
- **NOTE** the areas of good practice that have been reported within this paper and areas for improvement.