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# Patient and public involvement: 2019/20 annual review and priorities

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Chair, Strategic lay forum

# What we'll cover

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- Progress against our priorities for 2019/20
- Feeding into the Trust's 2020/21 business plan
- Our involvement in the Trust's Covid-19 response
  - Spotlight on responding to BAME community fears
  - Spotlight on 'recovery and reset'
  - Spotlight on ensuring equal access to our care
- Our involvement in redevelopment
  - Spotlight on creating a shared vision
- Our updated priorities – refreshed following Covid-19

# Our 2019/20 priorities and progress

## 1 To increase the influence and reach of the strategic lay forum

- Invited to contribute to the Trust's 2020/21 business plan and had significant, early input. We were able to check alignment of priorities with Trust chair and chief executive:
  - promoted the importance of staff wellbeing and morale as necessary for kind, compassionate and effective patient care
  - challenged the Trust to focus on and improve the appointment booking system (the number one complaint) and promote use of online patient record systems, such as the Care Information Exchange
- Major input to the 'recovery and reset' programme following Covid-19 and redevelopment programme:
  - Trust now has more focus on digital poverty, and fears and concerns of seldom-heard groups



# Our 2019/20 priorities and progress

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## 2 To expand the lay partner programme and strengthen lay partner involvement

- Currently have 85 lay partners across 25 projects, improved induction and regularly reviewed collaboration and impact
- Examples of lay partner impact:
  - advocating the role of carers and families and how they can support patients when considering 'end of life' care
  - promoting the importance of clear patient information, 'bedside manner' and accessible language when using new medical devices or treatments
  - highlighting adolescents' communication and pastime preferences and advocating for a separate play space from young children
- Held four lay partner community events, included Trust 'values and behaviours' training, co-designed the redevelopment involvement charter
- To date, have collaborated with 126 lay partners since the start of the programme

# Our 2019/20 priorities and progress

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## **3 To demonstrate lay partner impact through evaluation**

- Co-designed and agreed an impact evaluation methodology and plan with lay partners, staff, quality improvement colleagues, Imperial Health Charity and Imperial College London
- To be linked with 'learning and insights' and will be delivered in Q3 or Q4

## **4 To support a reduction in health inequalities**

- Reviewed the equality delivery system, the NHS tool to review equality performance with staff, patients and public. Advised and supported the Trust on engaging community groups representative of those with protected characteristics
- Raised rumours and fears amongst BAME communities about coming to hospital during the pandemic – supported the Trust in responding, in the short term through two tailored videos (with translations) and meetings with local BME forum and now exploring longer term responses

## **5 To learn and act on feedback and complaints**

- Reviewed data which led to conclusion that improving appointment bookings should be a key focus for the Trust and fed into business planning

## **6 To embed patient-centred care in all staff objectives**

- Involved in shaping the Trust's values and behaviours programme and training. More to do

# Input to Trust 2020/21 business planning

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## The strategic lay forum asked the Trust to:

- Enable kind compassionate care that reflects 'what matters most to patients'
- Continue to work on improving the appointment system and wider use of an online patient record system
- Promote preventative and self care
- Improve and co-design care pathways so they are genuinely user-centred and patients can easily navigate their care
- Adopt innovation and learn from other organisations
- Develop pathways so they are integrated around patients
- Take a leading role across the sector to achieve true integrated care, centred around patients
- Ensure site redevelopments are suitable for change and future models of care
- Introduce measurement systems to value things that matter to patients and measure care outcomes

- Strong existing relationships enabled rapid collaboration:
  - strategic lay forum chair attended the daily clinical reference group as soon as it was established
  - this enabled the patient voice to be heard throughout, resulting in more patient-centred pathways, the development of clear patient and visitor information and issues of equity and inclusivity to be raised at an early stage
  - the patient reference group continued to input into patient communication, improved discharge information and a new inpatient booklet
- The strategic lay forum continued, meeting online in May, to input into key projects
- The strategic lay forum highlighted the disconnect and fear with seldom-heard groups, BAME communities and vulnerable groups and emphasised the need for inclusivity – communication challenges and digital poverty
- Lay partners are being appointed to all major recovery and reset programmes

# Spotlight on responding to BAME fears



Imperial College Healthcare  
NHS Trust

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Nafsika Thalassis, director of Hammersmith and Fulham BME Health Forum and member of our strategic lay forum, raised concerns and fears circulating amongst local black, Asian and minority ethnic communities about hospital care and Covid-19.

She talks briefly in a video [here](#) about what happened and the impact.



# Spotlight on 'recovery and reset'

- Input includes:
  - ensuring the operational programmes were focused more around patients and there was more opportunity for lay input, review and feedback
  - promoting the role of online patient record system (Care Information Exchange) and how that can enable self-care and greater levels of patient ownership and control
  - encouraging the Trust to collaborate and integrate care with partner organisations
- Eight lay partners already appointed to four new key programmes:
  - operational 'subject matter expert' group
  - models of care
  - remote care 'ways of working'
  - staff support programme
- Six lay partners involved in organisational strategy refresh big rooms, including:
  - bringing a focus to 'what matters most for patients' and designing care around individuals' needs, wants and preferences
  - ensuring developments are integrated with the community where possible
  - focusing on seldom-heard groups and encouraging more active engagement

# Spotlight on ensuring equal access to our care

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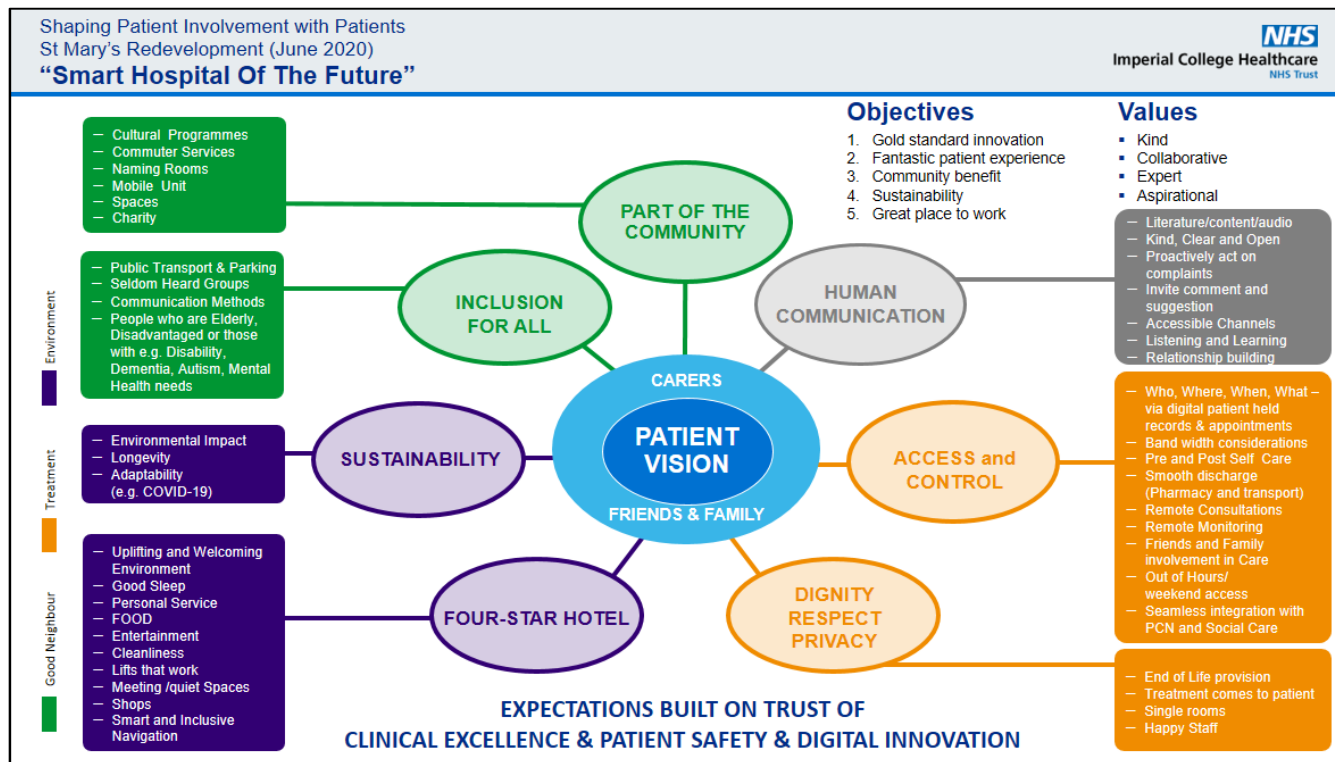
Jane Wilmot, member of our strategic lay forum and accessibility advocate, is helping to raise issues and develop solutions to ensure all patients have equal access to our care.

The forum has been focusing on how we respond to digital poverty with the move to much more digital care. Jane has also been helping the Trust consider how face masks and coverings are inhibiting lip reading and how we can best respond. She talks briefly in a video [here](#) about this work.

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- Strategic lay forum and lay partner involvement from the start
  - Co-designed an ‘involvement charter’ with staff and patients. This sets out the expectation for involvement throughout the project, now included in the communication plan and shared with redevelopment partners for consistent collaboration
  - Lay and patient/public input at all levels:
    - strategic lay forum chair on stakeholder steering group
    - lay partner on redevelopment communications group
    - lay partners involved in ‘clinical thinking group’
    - first phase of patient and public insight and engagement launched in July – discussion groups, survey and community group outreach sessions

# Spotlight on creating a shared vision

Developed a patient vision 'mind map', co-designed first phase of insight/engagement and led work to generate 'pen portraits' from lay partners and volunteers.



# Our priorities for 2020/21

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- To retain focus on patient-centredness and ‘what matters most to patients’, including staff morale and ensuring the Trust is a ‘great place to work’
  - To champion integrated care
  - To continue to maximise the patient-voice and user insight in redevelopment
  - To bring clear patient focus to ‘recovery and reset’ projects, especially:
    - insight and data gathering through relationship building, particularly with seldom-heard groups
    - inclusive access to information and care, such as interpreters, sign language and non-digital access
  - To increase lay partner diversity through proactive recruitment and involvement, exploring remuneration in line with national policies
  - To continue to challenge the Trust to improve the appointment booking system – a longstanding issue and difficult to resolve
  - To contribute to the development and use of the online patient record system, the Care Information Exchange