

Agenda and Papers

for the

**Kent Community Health NHS
Foundation Trust**

Council of Governors

in Public

to be held at 1pm on

Wednesday 15 January 2020

In

**Astor Pavilion
Kent Event Centre
Detling
Maidstone
Kent
ME14 3JF**

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**Meeting of the Kent Community Health NHS Foundation Trust
Council of Governors
to be held in Public at 1.00pm on 15 January 2020
in the Astor Pavilion, Kent Event Centre, Detling, Maidstone,
Kent, ME14 3JF**

AGENDA

1. STANDARD ITEMS

- | | | | |
|-----|--|-------|--------|
| 1.1 | Introduction by Chair | Chair | |
| 1.2 | Apologies for Absence | Chair | |
| 1.3 | Declarations of Interest | Chair | |
| 1.4 | Minutes of the Kent Community Health NHS Foundation Trust Council of Governors meeting held on 31 October 2019 | Chair | Att. 1 |
| 1.5 | Matters Arising of the Kent Community Health NHS Foundation Trust Council of Governors meeting held on 31 October 2019 | Chair | Att. 2 |
| 1.6 | Chair's Report <ul style="list-style-type: none"> • Report on Service Visits by the Chair and Non-Executive Directors | Chair | Att. 3 |
| 1.7 | Trust Quarterly Report | CEO | Att. 4 |

2. REPORTS TO THE COUNCIL

- | | | | |
|-----|--|--|--------------|
| 2.1 | Governor feedback from each of the constituencies | Full Council | Verbal |
| 2.2 | Report from Communication and Engagement Committee | Chair of Committee | Verbal |
| 2.3 | Feedback from Charitable Funds Committee | Public Governor, Dover and Deal | Verbal |
| 2.4 | Report on Patient Experience and Complaints | Chief Nurse | Att. 5 |
| 2.5 | Report on Patient and Public Engagement | Director of Workforce, OD and Communications | Att. 6 |
| 2.6 | Sustainability Update | Corporate Services Director | Presentation |

2.7	Freedom to Speak Up	Freedom to Speak Up Guardian	Att. 7
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3. ITEMS FOR APPROVAL

4. PAPERS AVAILABLE FOR GOVERNORS

- 4.1 The following papers are shared for Governor information and are available on Flo: For noting only
- Formal Board Agenda – 28 November 2019
 - Confirmed Board Minutes – 25 July 2019
 - Chief Executive's Report
 - Committee Assurance Reports
 - Integrated Performance Report

5. ANY OTHER BUSINESS

- 5.1 Any other items of business previously notified to the Chair.

6. QUESTIONS FROM MEMBERS OF THE PUBLIC RELATING TO THE AGENDA

7 DATE AND VENUE OF NEXT MEETING

The next meeting of the Kent Community Health NHS Foundation Trust Council of Governors will take place in public at 1pm on Wednesday 29 April 2020 in the Clive Emson Conference Centre at the Kent Event Centre, Detling, Maidstone, Kent, ME14 3JF



UNCONFIRMED Minutes
of the Kent Community Health NHS Foundation Trust Council of Governor's Meeting
Held at 13.00 on Thursday 31 October 2019
In the Astor Pavilion, Kent Event Centre, Kent Showground,
Detling, Maidstone, Kent, ME14 3JF

Meeting held in Public

Present:

John Goulston, Chair
Janet Allen, Staff Governor
Sonja Bigg, Staff Governor, Adult Services
Claire Buckingham, Staff Governor, Health and Wellbeing
Alison Carter, Appointed Governor, Kent Dementia Alliance
Jo Clifford, Public Governor, Shepway
Carol Coleman, Public Governor, Dover and Deal
Ruth Davies, Public Governor, Tonbridge and Malling
John Fletcher, Public Governor, Ashford
John Harris, Public Governor, Sevenoaks
Dr Amy Heskett, Staff Governor, Adult Services
Miles Lemon, Public Governor, Swale
Anna Morris, Appointed Governor, Carers FIRST
Dr Sue Plummer, Appointed Governor, Universities
David Price, Public Governor, Maidstone
Andrew Scott-Clark, Appointed Governor, Kent County Council
Nigel Stratton, Appointed Governor, Age UK
John Woolgrove, Public Governor, Rest of England

In Attendance:

Pippa Barber, Non-Executive Director
Paul Bentley, Chief Executive
Peter Conway, Non-Executive Director
Natalie Davies, Corporate Services Director
Joy Fuller, Governor Lead (Minute Taker)
Louise Norris, Director of Workforce, Organisational Development and Communications
Bridget Skelton, Non-Executive Director
Mercia Spare, Chief Nurse

31/10/1 Introduction by Chair

Mr Goulston welcomed everyone present to the meeting of the Council of Governors (the Council).



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Mr Goulston advised that this was a formal meeting of the Council held in public, rather than a public meeting, and as such there would be an opportunity for questions from members of the public at the end of the meeting.

31/10/2 Apologies for Absence

Apologies were received from Jane Hetherington, Public Governor - Thanet, Mary Straker, Public Governor - Canterbury, Avtar Sandhu, Public Governor - Dartford and Maria-Loukia Bratsou, Staff Governor - Children and Families.

The meeting was quorate.

31/10/3 Declarations of Interest

No conflicts of interest were declared other than those formerly recorded.

31/10/4 Minutes of the Kent Community Health NHS Foundation Trust (the Trust) Council of Governors meeting held on 31 July 2019

The minutes were read for accuracy.

In response to a question from Dr Plummer, it was agreed that the minutes should be updated to reflect the term of "Appointed Governors", rather than Partner Governors which was used in the constitution.

The Council **APPROVED** the minutes, subject to the above amendment.

31/10/5 Matters Arising

All items were confirmed and closed.

The Council **RECEIVED** the Matters Arising.

31/10/6 Chair's Report

Mr Goulston presented the report to the Council.

Mr Goulston thanked Ms Coleman for chairing the Annual General Meeting of the Governors on 26 September 2019.

Mr Goulston had attended the grand opening of the Nursing Academy, which had been officially opened by Baroness Harding, Chair of NHS Improvement. He noted that two governors had also attended. He added that he had been delighted to speak to some of the students and was struck by the maturity and openness in which they had described what the academy meant to them. It was agreed that a progress update would be provided at future Council meetings.

Action - Mr Goulston

The Council **RECEIVED** the Chair's Report.

31/10/7 Trust Quarterly Report

Mr Bentley presented the report to the Council.

Mr Bentley highlighted that the trust had been awarded the level 'Routine' by the Quality Surveillance Group, which meant that there were no persistent or increasing quality concerns. Mr Bentley provided assurance that this was the highest reachable level.

Mr Bentley assured the Council that the winter plans had been scrutinised by the Board at their recent meeting.

Mr Bentley provided an overview of the recent Leaders Conference. Equality and diversity was the main theme of the conference. He added that they were joined by Kent Supported Employment, who continued to work in partnership with the trust and assisted in enriching the workforce.

Mr Bentley provided an update on the progress of the new architecture of Kent and Medway, and explained that all Clinical Commissioning Groups (CCGs) in Kent and Medway had agreed to form a single CCG with effect from April 2020.

Mr Bentley explained that since the last Council meeting, the five year strategic delivery plan for Kent and Medway had been developed. He added that the plan had not yet been formally ratified, and agreed that the finalised plan would be presented to the Council of Governors in due course.

Action - Mr Bentley

Mr Bentley confirmed that the information provided on planning for exiting the European Union had been correct at the time of writing the report but national events had overtaken this. He agreed to provide a further update at the Council meeting in January.

Action - Mr Bentley

In response to a question from Dr Plummer, Mr Bentley confirmed that the trust was very supportive of the movement to a single CCG. He explained that the eight CCGs commissioned different services in different ways, and as a Kent-wide provider this had been unnecessarily complex and challenging, which as a consequence meant that patients had been in receipt of different services across the county.

In response to a question from Dr Plummer, Mr Bentley provided assurance that the changes in Kent and Medway were being replicated across the Country.

Ms Scott-Clark commented that in the future there would be less of a commissioner / provider split, with a move towards commissioning on outcomes rather than specifics.

Ms Bigg queried whether trust services would be affected by the move to a single CCG, and Mr Bentley provided assurance that as a trust we would need to continue to provide outstanding care which was the most effective manner in

which to operate.

The Council **RECEIVED** the Chief Executive's Report.

31/10/8 Governor Feedback from each of the Constituencies

Ms R Davies had attended the west Kent Heads of Service meeting in Sevenoaks. She had also attended a We Care visit to the Falls service. She added that she had also attended the launch of the nursing academy, and noted the enthusiasm of the students.

Ms Carter had attended the Annual General Meeting, and found the speakers to be inspirational. She added that she thought it was a fantastic event. Ms Carter also attended the launch of the nursing academy.

Ms Clifford had attended the Annual General Meeting where she had contributed as a member of the choir.

Mr Price had attended the west Kent Heads of Service meeting in Sevenoaks. He added that he had also participated in two Patient Led Assessment of the Care Environment (PLACE) visits.

Mr Scott-Clark confirmed that Paul Carter had stepped down as Leader of Kent County Council. Roger Gough had been elected as the new Leader at the last County Council meeting. Claire Bell remained the portfolio holder for adult social care and public health.

Mr Stratton had attended a visit with Mr Goulston to see the home first and rapid response teams. He commented that it had been good to see the services in operation and witness the dedication of the staff. He added that he had also attended the east Kent Heads of Service meeting in Dover, where he had also taken the opportunity to visit Age Concern at Herne Bay and Deal. Mr Stratton had also attended the Annual General Meeting. He mentioned that unfortunately the We Care visit he had booked onto was cancelled, but hoped to attend another visit in the future. He added that Kent County Council (KCC) would be going out to tender for the older peoples welfare contract.

Dr Plummer provided an update on the Kent and Medway Medical School, and confirmed that there had been over 1,400 applications for 100 places. She added that many of the applicants had been local.

Mr Fletcher confirmed that the One You shop had moved to a more central location in Ashford. He had attended a health information day at Wye village hall. He mentioned that around 60 people had attended, and the focus of the day was aimed at changes in the NHS.

Dr Heskett commented that much of her work in west Kent had been around avoiding admissions related to frailty. Mr Goulston commented that during his service visits, he had received messages from patients that they were pleased to be at home and not in hospital.

Ms Allen had attended the Annual General Meeting as part of the choir. She had also attended a We Care visit, as well as the west Kent Heads of Service meeting in Sevenoaks.

Ms Bigg had attended the recent Physiotherapy Conference.

Ms Buckingham had attended the Annual General Meeting, and commented that she had found the case studies to be very powerful. She had attended a We Care visit to the long term services in Thanet. She noted that there had been challenges around staffing that were now being addressed.

Ms Buckingham had attended the Every Day Active Conference. She provided an overview of the active champions programme, and asked if the trust could participate by training members of staff.

Ms Coleman had attended the recent Specialist and Elective Services Conference. She added that she had attended many public events. Ms Coleman thanked the Council for giving her the opportunity to act as Chair for the Annual General Meeting, and was looking forward to the Let's Discuss Cancer event planned for March. Ms Coleman had attended three PLACE visits, where some issues had been raised, particularly at Faversham. Grounds maintenance remained an issue at all three hospitals and this had also been raised.

Ms Coleman had requested to participate in the research groups, and commented that research needed to be communicated further across the trust.

Mr Harris had attended the west Kent Heads of Service meeting in Sevenoaks which he found very informative. He had also attended a west Kent Clinical Commissioning Group meeting which provided an interesting overview of the progress of the Primary Care Networks. Mr Harris confirmed that he had also attended the Annual General Meeting, as well as a We Care Visit to the Community Nursing Team in Sevenoaks.

Mr Woolgrove had attended the Annual General Meeting which he found to be a good event although commented on his disappointment regarding the modest attendance. He had also attended two training days organised by GovernWell relating to accountability and effective questioning. He confirmed that he had discussed with Mr Goulston regarding the possibility of training for all governors.

Mr Lemon had observed the recent Audit and Risk Committee Meeting. He had also attended the Let's Discuss Dementia event in Thanet, which he found to be very stimulating. He praised the Dementia Friends session given by Emily Bradford, as well as a positive and moving talk by Chris Norris about living with dementia.

Mr Lemon added that he had attended a lecture by Professor Joanne Brooke from Birmingham City University who talked about a study into the care of those in the prison system living with dementia. He commented that 16% of the

prison population were over 50 years of age, and that there was virtually no care or understanding of the needs of those in the prison system living with dementia.

31/10/9 Feedback from Communications and Engagement Committee

Ms Coleman provided a verbal report to the Council.

Ms Coleman confirmed that the increase in membership during May was due to the recruitment of breast feeding volunteers who had been encouraged to sign up as members.

Ms Coleman confirmed that in future governors would focus on engaging with current members, rather than increasing membership.

Ms Coleman confirmed that Community Groups were being set up in areas that did not have a Patient Engagement Group, and would provide another opportunity for governors to get involved if they wished. The first group would commence in Ashford. It was agreed that the Engagement Team should notify the Governor Support Office when the groups had been arranged.

Action - Ms Norris

The Council **RECEIVED** the verbal Report.

31/10/10 Feedback from Charitable Funds Committee

Ms Coleman confirmed that the Committee would be meeting on 29 November.

Ms Coleman commented that incoming funds continued to be a challenge, and the inability to access the restricted pool continued to be an issue.

Ms Coleman confirmed that the query raised at the previous meeting relating to funding of the choir had been resolved.

The Council **RECEIVED** the verbal Report.

31/10/11 Report on Patient Experience and Complaints

Dr Spare presented the report to the Council.

Dr Spare highlighted that the patient satisfaction and Friends and Family Test (FFT) scores remained consistently high.

Dr Spare commented that there continued to be a small number of people who didn't recommend the trust, and reassured the Council that they continued to review those responses thoroughly.

Dr Spare highlighted that patient satisfaction survey and FFT scores at the Minor Injury Units and Community Hospitals continued to be good, but added that there were some areas that needed further work.



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Dr Spare explained that in terms of those people that rated the trust as 'unlikely to recommend', the theme was usually in relation to missed visits.

Dr Spare confirmed that the trust continued to collect the forget me not feedback from patients with dementia or a cognitive impairment.

Dr Spare confirmed that there had been 58 complaints, of which 10 were multi-agency. She added that they had not seen any significant fluctuations in the themes and trends. Dr Spare mentioned that they had seen a continued drop in the number of community nursing complaints, which was something to be celebrated given the number of patient contacts.

In response to a question from Ms Allen, Dr Spare confirmed that the completion of bereavement surveys was an ongoing piece of work. She added that this was not an easy issue to resolve due to the timing of the survey, and staff were reluctant to send out surveys to grieving family members.

In response to a question from Ms Allen, Dr Spare confirmed that multi-agency complaints were led by the organisation who owned the largest part of the complaint. She added that following receipt of a multi-agency complaint, a meeting would be convened to discuss the complaint, and one organisation would be nominated as lead. All organisations involved would work together to provide a single response, which would usually be collated by the lead organisation.

In response to a question from Ms Coleman, Dr Spare agreed to contact the Communication Team regarding the issue of Patient Advice and Liaison Service (PALS) being restricted to answer complaints due to contact information not being updated on FLO.

Action - Dr Spare

In response to a question from Ms Coleman regarding podiatry letters sent in bulk to patients which had inundated the response system, Dr Spare agreed that the letters and answerphone should have included a request to leave information that would identify the patient, ie NHS number. She added that they would continue to work to improve this.

In response to a question from Dr Heskett, Dr Spare confirmed that the trust would continue to work on the format of the patient surveys to ensure that all patient groups could easily access and complete the form.

In response to a question from Dr Heskett, Dr Spare agreed that complaints related to end of life were important as they were the complaints that couldn't be put right. Dr Spare provided assurance that she was a member of the end of life steering group where all complaints were reviewed.

A discussion took place regarding the content and presentation of the Patient Experience and Complaints report, and how it could be improved for future meetings. It was agreed that Governors would provide suggestions to the

Governor Support Office who would collate for Dr Spare to take forward.

Action - Dr Spare / Governors

In response to a question from Mr Price regarding district nursing complaints, Dr Spare confirmed that all trends were reviewed geographically and over time.

The Council **RECEIVED** the Report.

31/10/12 Report on Patient and Public Engagement

Ms Norris presented the report to the Council.

Ms Norris highlighted that the number of people using Browsealoud on the public website had increased significantly.

In response to a question from Mr Fletcher, Ms Norris confirmed that 'open rate' was in relation to the number of members who had opened a particular email.

In response to a question from Ms R Davies regarding volunteering, Ms Norris confirmed that all volunteering opportunities were published on the website and through social media.

Ms Trehane, Head of Campaigns, who was a public observer at the meeting, was then asked to contribute to the question. Ms Trehane confirmed that any specific volunteering roles would be promoted through the relevant trust services. She provided an example of the promotion of breastfeeding volunteers through the health visiting service. Ms Trehane confirmed that volunteering opportunities were also shared with community networks, gateways and through social prescribing.

Mr Woolgrove thanked Ms Norris for the presentation of the report, which he found to be both informative and accessible.

In response to a question from Mr Price, Ms Norris confirmed that a 'Pets at Therapy' (PAT) dog was a highly trained therapy dog who visited patients in hospital. She added that they provided a lot of comfort for people, especially those that missed their own pets at home. Dr Plummer commented that they also had PAT dogs in the university libraries.

The Council **RECEIVED** the Report.

31/10/13 Governor Elections

Ms N Davies presented the report to the Council.

Following consideration, the Council **APPROVED** the proposed timetable for the governor elections.



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31/10/14 Any Other Business

In response to a question from Ms Coleman, Mr Bentley confirmed that there had not been any recent updates on the urgent treatment centres, but there continued to be an open dialogue with Clinical Commissioning Groups.

There was no further business to discuss.

31/10/15 Questions from members of the public

In response to a question from Mr Zein regarding the contract for grounds maintenance for Community Hospitals, Ms N Davies confirmed that they had contacted NHS Property Services regarding the maintenance of the grounds, but unfortunately NHS Property Services stated that they had met the necessary requirements, while the dialogue continued, Ms N Davies confirmed that the trust would be undertaking due diligence with a view to repatriate properties to local ownership.

Ms Carter queried whether there could be volunteering opportunities for keen gardeners in relation to the upkeep of the grounds. Ms N Davies agreed to take this forward.

Action - Ms N Davies

Mr Zein confirmed that one of the doors at Herne Bay Hospital was unsuitable for disabled access, and an appropriate door had been sourced, however, he was concerned that the door had not yet been replaced. Ms N Davies agreed to follow up and report back.

Action - Ms N Davies

Ms N Davies commented that the PLACE visits would identify all issues in relation to the physical aspects of the community hospitals, and as a result, specific action plans would be put into place.

Ms Davies mentioned that NHSPS had removed the ability of the trust to view active 'jobs' raised by staff. The trust was attempting to reverse this decision.

In response to a question from Mr Zein, Ms N Davies confirmed that the trust had been undertaking a review of the buildings to see where adaptations could be made to include "changing places" initiatives.

Mr Goulston thanked Ms Bigg on behalf of the Council, the Board and all staff at the trust for her valuable contribution to the Council as both staff governor and lead governor.

31/10/16 Date and Time of Next Meeting

Wednesday 15 January 2020 at 13.00.

The Astor Pavilion, Kent Event Centre, Detling, Maidstone, ME14 3JF.

MATTERS ARISING FROM THE COUNCIL OF GOVERNORS MEETING HELD ON 31 OCTOBER 2019

OPEN ACTIONS

Meeting Date	Agenda Item	Action Agreed	By Whom	Current Status/Update
31 October 2019	31/10/6	To provide a verbal progress update on the Nursing Academy at future Council meetings.	Mr Goulston	15/1/20 – verbal update to be provided.
31 October 2019	31/10/7	To present the finalised five year strategic delivery plan to the Council of Governors.	Mr Bentley	15/1/20 – To be presented to the Council in due course, following ratification by the Board.
31 October 2019	31/10/7	To provide an update on planning for exiting the European Union at the Council meeting in January.	Mr Bentley	15/1/20 – Update provided in trust quarterly report.
31 October 2019	31/10/9	Engagement Team to notify the Governor Support Office when the Community Groups had been arranged.	Ms Norris	15/1/20 – Engagement Team to notify Governor Support Office.
31 October 2019	31/10/11	To contact the Communication Team regarding the issue of Patient Advice and Liaison Service (PALS) being restricted to answer complaints due to contact information not being updated on FLO.	Ms Spare	15/1/20 – It is the responsibility of individual teams to keep contact information updated on FLO. Ms Coleman confirmed that the issue had been resolved.
31 October 2019	31/10/11	To review the format and content of the Patient Experience and Complaints Report.	Ms Spare	15/1/20 – New report presented at January meeting.

Meeting Date	Agenda Item	Action Agreed	By Whom	Current Status/Update
31 October 2019	31/10/15	To pursue volunteering opportunities for keen gardeners in relation to the upkeep of trust grounds.	Ms N Davies	15/1/20 – There is a project to improve the grounds around KCHFT sites, specifically with the objective to improve biodiversity and our green spaces. This project will fit into the trust-wide work around sustainability. The trust would greatly value the input of volunteers to help with biodiversity and improving and maintaining our green spaces. This will be pursued in due course.
31 October 2019	31/10/15	To follow up on the replacement of the door at Herne Bay Hospital, which had been deemed unsuitable for disabled access.	Ms N Davies	15/1/20 – There are a number of building projects ongoing, and this would be part of the plans for the site. Work part-funded by the league of friends is close to completion.

MATTERS ARISING FROM THE COUNCIL OF GOVERNORS MEETING HELD ON 31 OCTOBER 2019

CLOSED ACTIONS

Meeting Date	Agenda Item	Action Agreed	By Whom	Current Status/Update
31 July 2019	31/07/6 – Chair's Report	To update the Chair and NED service visit report, and re-circulate to the governors.	Ms Davies	31.10.19 – report updated and circulated.
31 July 2019	31/07/7 – Trust Quarterly Report	To raise the concern regarding the lack of co-ordination with the voluntary sector in relation to the changes to the system architecture at the next Kent Voluntary Sector Emergency Group (KVSEG) meeting.	Ms Allen	31.10.19 – KVSEG is well established, and managed by the Kent Resilience Team. There are ongoing discussions around system architecture. Ms Allen will respond directly to Mr Stratton regarding the involvement of Age UK.
31 July 2019	31/07/8 - Governor Feedback from each of the Constituencies	To provide feedback regarding the 'Holding NEDs to Account' GovernWell course at the next meeting.	Mr Woolgrove	31.10.19 - feedback to be provided within governor constituency update
31 July 2019	31/07/8 - Governor Feedback from each of the Constituencies	To identify the cause of the increase in membership during May.	Ms Norris	31.10.19 – The increase in membership was due to the recruitment of breast feeding support volunteers who, on their induction, were encouraged to sign up as public members.

Meeting Date	Agenda Item	Action Agreed	By Whom	Current Status/Update
31 July 2019	31/07/10 – Feedback from Charitable Funds Committee	To confirm whether funds were used for the Trust Choir.	Ms Davies	31.10.19 – The funding arrangement was for a fixed period and was not agreed to be funded as a continued arrangement via the Charitable Funds Committee.
31 July 2019	31/07/12 – Report on Patient and Public Engagement	To share the number of interpreting requests.	Ms Norris	31.10.19 – Information has been included within the report on Patient and Public Engagement.
31 July 2019	31/07/12 – Report on Patient and Public Engagement	To clarify whether the End of Life Steering Group had received Easy Read leaflets.	Ms Norris	31.10.19 – to be updated at the meeting.
31 July 2019	31/07/12 – Report on Patient and Public Engagement	To share the dates of all known Patient Experience Group meetings with the governor support office.	Ms Norris	31.10.19 – Governor support office received dates, and shared with governors.
31 July 2019	31/07/13 – Annual Report and Accounts	To receive points of accuracy from governors in relation to the Annual Report and Accounts.	Ms Davies	31.10.19 – Received.
31 July 2019	31/07/14 – Governors Annual Report	To share the draft annual report with governors prior to publication.	Ms Bigg	31.10.19 – completed. Annual report published in Autumn trust magazine.
31 July 2019	31/07/14 – Governors Annual Report	To seek a governor to present the governor report at the Annual General meeting in September.	Ms Bigg	31.10.19 – Ms Coleman agreed to present the governor report.

Meeting Date	Agenda Item	Action Agreed	By Whom	Current Status/Update
31 July 2019	31/07/17 – Amendments to the Constitution	To ensure that the amendment to the composition of the council of governors would be included in the governor report at the Annual General Meeting.	Ms Davies	31.10.19 – Amendment to the composition of the Council was included in the governor report at the AGM.
31 July 2019	31/07/17 – Amendments to the Constitution	To contact the proposed new partnership governor organisations to seek a representative.	Ms Davies	31.10.19 – Organisations contacted and two new partnership governors were appointed to represent Carers FIRST and the Kent Dementia Alliance.
31 July 2019	31/07/18 – Any Other Business	To provide an update on the Research Strategy at the next meeting.	Dr Spare	31.10.19 – on agenda for the October development session.
30 May 2019	30/05/7 – Trust Quarterly Report	To provide more detail about the background of the delay referenced in the report regarding the Buurtzorg pilot in Edenbridge.	Mr Bentley	31.10.19 – to be updated at the meeting. 31.7.19 – update will be provided at the October meeting.

Title of Meeting	Council of Governors
Date of Meeting:	15 January 2020
Agenda Item:	1.6
Subject:	Service Visits and Partnership Meetings attended by the Chair and Non-Executive Directors
Presenting Officer:	John Goulston, Chair

Period covered – 1 November 2019 to 15 January 2020

Name	Service visits	Stakeholder/ Partnership meetings / events	Other meetings / events
John Goulston	<p>5 November - Multi-disciplinary Team meeting Maidstone Central Primary Care Network</p> <p>18 November - Healthy Communities programme, Folkestone</p> <p>16 December – East Kent Respiratory Team</p>	<p>12 November – Visit by Chris Hopson</p> <p>15 November - West Kent Integrated Care Partnership Development Board</p> <p>22 November - Kent & Medway Non-Executive Oversight Group</p> <p>26 November - Meeting with Chair of Kent & Medway NHS and Social Care Partnership NHS Trust</p> <p>5 December - NHS Providers Chairs and CEO network</p> <p>6 December - Stakeholder event for the recruitment of Kent & Medway Accountable Officer</p> <p>13 December - West Kent Integrated Care Partnership Development Board</p> <p>17 December - NHS Leadership event for Chairs and CEOs</p> <p>18 December - Medway and Swale Integrated Care Partnership, Chair's meeting</p> <p>6 January - Kent & Medway Non-Executive Oversight Group</p> <p>10 January - West Kent Integrated Care Partnership Development Board</p>	<p>7 November - Meeting with lead and deputy lead Governors</p> <p>14 November - Non-executive director recruitment stakeholder event and interviews</p> <p>20 November - Non-executive director recruitment stakeholder event and interviews</p> <p>22 November - Extraordinary Council of Governors meeting</p> <p>28 November - Board of Directors</p> <p>29 November – Charitable Funds Committee</p> <p>10 December – Board Development Day</p> <p>11 December – Audit & Risk Committee</p>

Name	Service visits	Stakeholder/ Partnership meetings / events	Other meetings / events
Sola Afuape (from 01/12/19)	16 December – East Kent Respiratory Team, Whitstable and Tankerton Hospital Ward and Facilities team. 20 December - Integrated Musculoskeletal Team (Churchill Centre)		28 November - Board of Directors 10 December – Board Development Day 20 December - Executive 1:1 NED Induction 8 January – Executive 1:1 NED Induction and Network Leads
Pippa Barber	3 December – Schools Service, East Sussex 9 December – West and North Kent Nurses	13 December - NHS Providers NED Network	14 November - Non-executive director recruitment stakeholder event and interviews 19 November – Quality Committee 26 November – FBI 28 November - Board of Directors 29 November – Charitable Funds Committee 10 December – Board Development Day 11 December – Audit & Risk Committee 18 December - Chief Nurse Interview Panel 3 January – Meeting with Chief Nurse 10 January – Mortality Surveillance Group 15 January – Council of Governors
Peter Conway		5 November – South East Audit Chairs Forum	19 November – Quality Committee 26 November – FBI 28 November - Board of Directors 9 December – Paediatrician Interview 10 December – Board Development Day 11 December – Audit & Risk Committee 15 January – Council of Governors

Name	Service visits	Stakeholder/ Partnership meetings / events	Other meetings / events
Professor Francis Drobniowski			14 November - Non-executive director recruitment stakeholder event and interviews 27 November – Strategic Workforce Committee 28 November - Board of Directors 10 December – Board Development Day 15 January – Council of Governors
Bridget Skelton	3 December – Schools Service, East Sussex		5 November – Shortlisting NED's 20 November - Non-executive director recruitment stakeholder event and interviews 26 November – FBI 27 November – Strategic Workforce Committee 10 December – Board Development Day 11 December – Audit & Risk Committee
Jen Tippin			29 November – Charitable Funds Committee
Nigel Turner			14 November - Non-executive director recruitment stakeholder event and interviews 27 November – Strategic Workforce Committee 28 November - Board of Directors 10 December – Board Development Day

Key -

Acronym	Full name
AGM	Annual General Meeting
ARC	Audit and Risk Committee
CEO	Chief Executive Officer
FBI	Finance, Business and Investment Committee
ICP	Integrated Care Partnership
KCC	Kent County Council
KCHFT	Kent Community Health NHS Foundation Trust
NED	Non-Executive Director
STP	Sustainability and Transformation Partnership

Title of Meeting	Council of Governors
Date of Meeting:	15 January 2020
Agenda Item:	1.7
Subject:	Trust Quarterly Report
Presenting Officer:	Paul Bentley, Chief Executive

1. Performance

1.1 Quality

The Quality indicators continue to report a strong position providing assurance that we are delivering high quality care.

Patient experience continues to be high with 97% of patients saying they were satisfied with their care in November, and 97.1% in December.

I am pleased to report that employee turnover continued to reduce in November (16.03%), and remains below average and below target.

The sickness figure for November was 4.44%, which was a decrease from the figure reported in October. Whilst it is normal for absence levels to increase over the winter period, this will continue to be monitored closely. The continued trend of improved performance in stress absence has remained in place for 11 months, since December 2018. This will be monitored in the coming months to ensure that the level of performance is maintained.

During October and November there was one lapse in care which related to a patient that developed category 2 pressure ulcers. The investigation has been completed and all lessons shared and cascaded.

During October and November, 127 falls were reported, four of which were avoidable and have also been fully investigated. The results of incident investigations such as these are reported to the Quality Committee and to the Board.

1.2 Financial Position

The Trust continues to deliver a strong financial position as shown in the tables in Appendix 1.

2. Patients

2.1 Winter Planning

The winter plan was approved by the Board at its meeting in October. Since then there has been an increase in demand with a higher number of patients than expected attending A&E. This has placed demand on the whole system to increase the flow of patients, and the trust has a number of actions in place.

2.2 UK's Exit of the European Union

The Trust, in partnership with organisations locally and nationally, has been preparing for the UK's exit of the European Union, which will now take place with effect from 1 February 2020 with the implementation period commencing on that date.

3. Our people

3.1 Freedom to Speak Up Guardian

I am delighted to report that I met with Joy Fuller, the Trusts' newly appointed Freedom to Speak Up Guardian (FTSU). Joy is keen to develop the FTSU role, as well as providing advice and support, but to also promote the culture of speaking up across the trust and ensure that effective processes are in place to support staff. In discussing further with Joy no common or reoccurring themes of concern are being reported.

3.2 Appointment of the Chief Operating Officer and Director of Strategy

Following the announcement of Lesley Strong's retirement, a recruitment process took place to appoint a chief operating officer and I am delighted that Pauline Butterworth joined the trust on 16 December 2019 as chief operating officer. Pauline joins the trust from East Sussex Healthcare Trust where she has been deputy chief operating officer since 2013.

Gordon Flack, Director of Finance, has taken up the role of Deputy Chief Executive in addition to his role as Finance Director

3.3 Appointment of two Non-Executive Directors

I am pleased to welcome Sola Afuape as our newly appointed Non-Executive Director. Sola, who started with us on 1st December, has 20 years' experience advising, designing and implementing national, regional and local public sector programmes. She has a passion for the wellbeing of patients, their families and carers, and I know that she is keen to spend time visiting services and meeting team members.

We also successfully recruited Paul Butler, who will join us as Non-Executive Director with effect from 1st March 2020. Paul has served as the Managing Director of South East Water and Mid Kent Water since 2006, overseeing a business with a turnover of £200 million and forming a successful merger of the two organisations during his leadership. He also holds Non-Executive roles as Chair of UK Water Industry Research and Director of Water UK. He previously served as Group Financial Controller for Mid Kent Holdings Group, of which Mid Kent Water was a division and was a Senior Audit Manager at Ernst & Young. Paul will take over from Jennifer Tippin as Chair of the Finance, Business and Investment Committee.

Thank you to the governors involved in the recruitment process for both NEDs.

3.4 Frailty Conference

Around 70 delegates from our trust, East Kent Hospitals University NHS Foundation Trust and the local voluntary and health sector joined our frailty conference at the Riverside Church in Chestfield.

‘Frailty: The final frontier’ featured presentations on the history of care homes, looking after our frail elderly people in the community, the work of local frailty hubs and using technology to enhance patient care. There was also a marketplace featuring stalls from voluntary sector groups and local NHS providers.

4. Partnerships

4.1 Visit by Chris Hopson, NHS Providers

Chris Hopson, Chief Executive of NHS Providers, visited the trust to find out more about our services. Chris met the Chair, the Executive Team and observed first-hand what the organisation does. Chris also spent time with the Long Term Nursing Team and Integrated Musculoskeletal (IMSK) Team at the Churchill Centre in Aylesford.

Chris had the opportunity to see how the trust is developing and investing in its workforce, along with the transformation project of the IMSK service to streamline and further improve the service.

4.2 New architecture of the NHS in Kent and Medway

The four Integrated Care Partnerships (ICP's) are continuing their development work and are all due to introduce a shadow form by April 2020. Engagement work and plans with stakeholders is underway and the integration of the newly formed Primary Care Networks (PCN's) into the ICP's is also taking place. The Trust remains committed to providing leadership and support to setting up this new way of collaborative working with a particular emphasis on the East and West Kent systems.

Engagement activities with PCN's are ongoing and the Trust is seeking to collaborate with all PCN's to jointly develop new and innovative ways of working together. The Medical Director and I also attended a meeting of the newly appointed Clinical Directors of the PCN's across West Kent.

The last two weeks are some of the most challenging for health services across the country and Kent and Medway is no different, I want to take the opportunity to thank each and every member of the team for their compassionate approach to the people we serve at this time of heightened demand.

Paul Bentley
Chief Executive

December 2019

Appendix 1

Assurance on Financial Sustainability

Surplus		Rag rating: Green	
	Actual	Plan	Variance
Year to Date £k	1,695	1,366	329
Year End Forecast £k	2,463	2,350	113
<p>The Trust achieved a surplus of £1,695k to the end of October.</p> <p>Pay and depreciation/interest have underspent by £3,714k and £58k respectively and non-pay has overspent by £1,783k.</p> <p>Income has under-recovered by £1,660k.</p> <p>The forecast is to deliver a surplus of £2,463k which is £113k ahead of the plan for the year, due to additional provider support funding received in 2019/20 but relating to 2018/19 of £113k.</p>			

Cash and Cash Equivalents		Rag rating: Green	
	Actual	Plan	Variance
Year to Date £k	40,117	37,934	2,183
Year End Forecast £k		33,252	
<p>Cash and Cash Equivalents as at M7 close stands at £40,117k equivalent to 64 days operating expenditure.</p> <p>The Trust recorded the following YTD public sector payment statistics 98% for volume and 97% for value.</p>			

Use of Resourcing Rating		Rag rating: Green	
	Year to Date Rating	Year End Forecast Rating	
Capital Service Capacity	1	1	
Liquidity	1	1	
I&E margin (%)	1	1	
Distance from Financial Plan	1	1	
Agency Spend	1	1	
Overall Rating	1	1	
<p>The Trust has scored the maximum rating against the Use of Resource rating metrics for M6 2019-20.</p>			

Capital Expenditure		Rag rating: Amber	
	Actual/Forecast	Plan	Variance
YTD Expenditure £k	1,439	4,252	2,813
Year End Forecast £k	7,372	7,654	282
<p>Capital Expenditure year to date is £1,439k, representing 34% of the YTD initial plan submitted.</p> <p>The full year forecast is £7,372k and the Trust expects to utilise this in full.</p>			

CIP		Rag rating: Amber	
	Actual	Plan	Variance
Year to Date £k	2,762	3,086	-325
Year End Forecast £k	5,299	5,299	0
<p>The Trust achieved CIPs of £2,761k to the end of October against a risk rated plan of £3,086k, which is £325k behind target.</p> <p>86.5% of the total annual CIP target has been removed from budgets at month seven.</p> <p>The Trust is forecasting to achieve the full plan of £5,299k by the end of the year.</p>			

Agency Trajectories		Rag rating: Green				
	M7			YTD		
	Actual	Trajectory	Variance	Actual	Trajectory	Variance
External Agency Expenditure (inc. Locums) £k	441	628	187	3,620	4,396	776
Locum Expenditure £k	-10	106	116	561	742	181
<p>External agency expenditure (including locums) was £441k against £628k trajectory in October. (YTD £3,620k against £4,396k trajectory).</p> <p>Locum expenditure in October was £-10k against £106k trajectory. (YTD £561k against £742k trajectory).</p>						



Kent Community Health

NHS Foundation Trust

Title of Meeting	Council of Governors
Date of Meeting:	15 January 2020
Agenda Item:	2.4
Subject:	Patient Experience and Complaints
Presenting Officer:	Mercia Spare, Chief Nurse

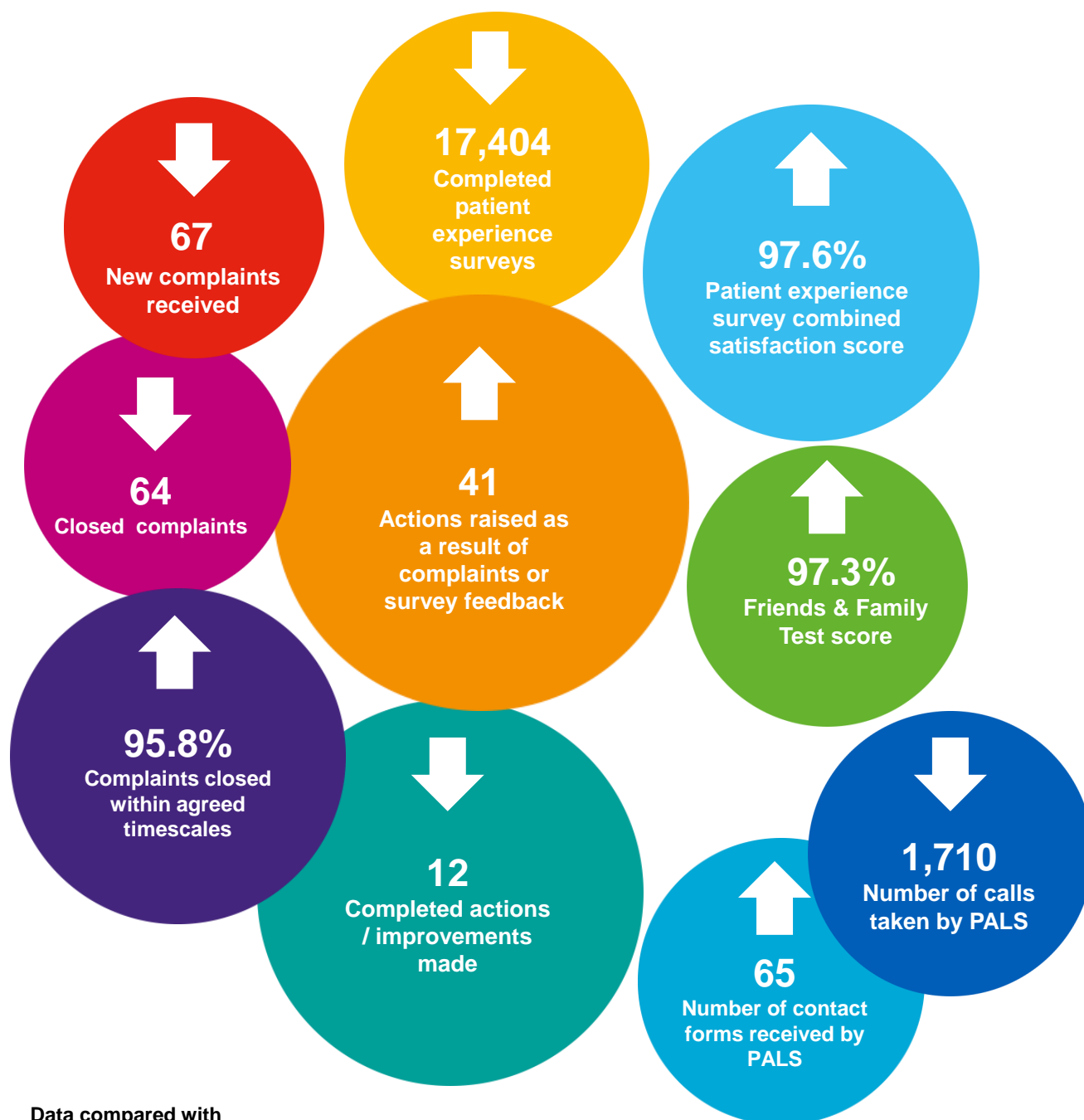
The attached report provides a summary of information regarding feedback received across all clinical services from complaints, Patient Advice and Liaison Service (PALS) and patient experience surveys. It highlights improvements to services as a result of feedback and initiatives taken to increase feedback from all people who use our services.

This report is in a new draft format and the Council of Governors are asked to give their feedback to inform future reports.

Mercia Spare
Chief Nurse
January 2020

Patient experience and complaints quarterly report - Quarter 3 2019/20

This report provides a summary of information regarding feedback received across all clinical services from complaints, Patient Advice and Liaison Service (PALS) and patient experience surveys.



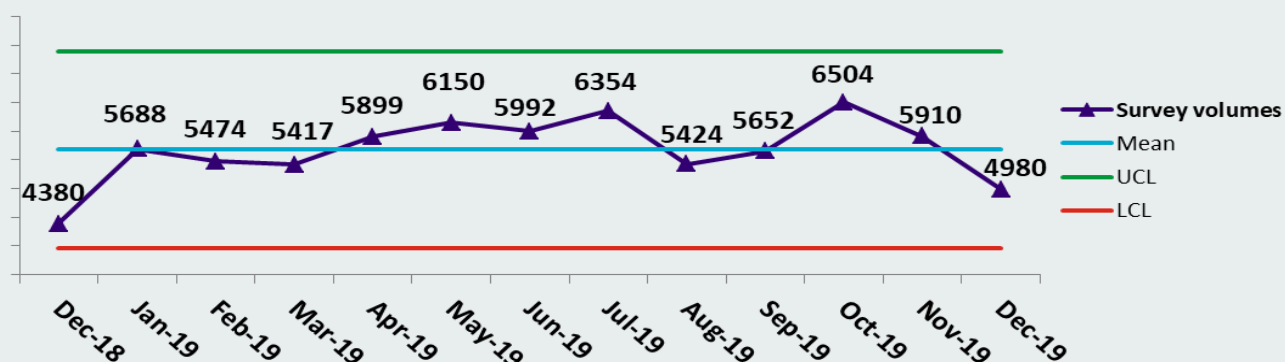
Data compared with
Quarter 2 2019/20



Sue Mitchell
AD Patient Safety and Experience
7 January 2020

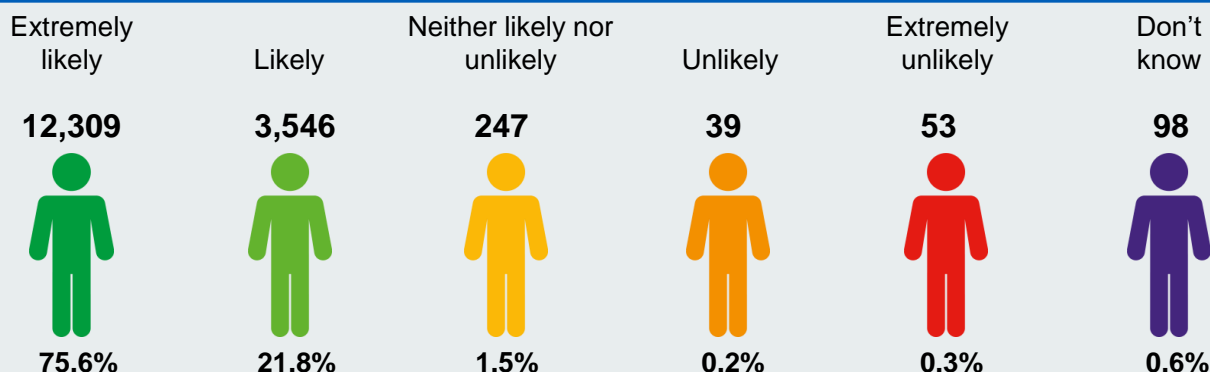
Patient experience survey volumes

Patient Experience survey overall volumes over a 13 month period



A drop in survey volumes is seen for the latter part of Q3, in line with the usual trend seen over the Christmas period. Overall satisfaction scores remain at a high 97% throughout Q3, consistent with Q2.

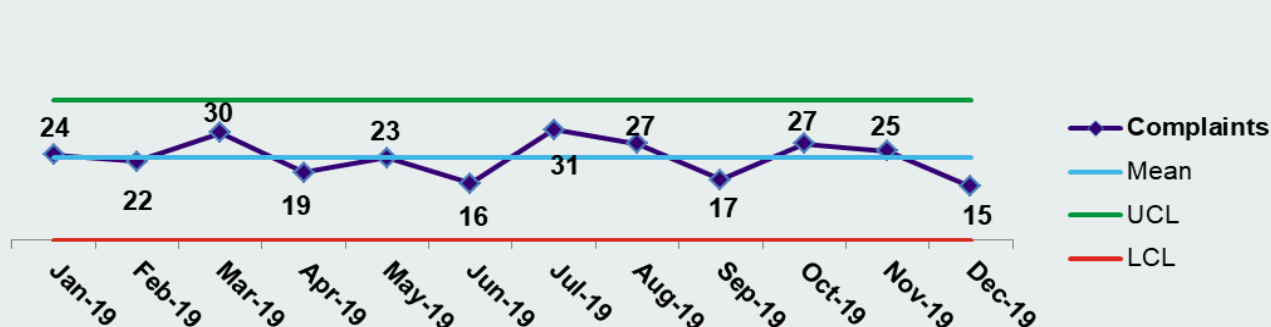
NHS Friends and Family Test (FFT) - How likely are you to recommend this service to friends and family if they needed similar care or treatment?



A total of 16,292 people answered the FFT question during Q3 giving an overall recommend score of 97.3%, consistent with Q2. 92 people (0.56%) chose to not recommend; it is possible that 44 of these responses were answered incorrectly as all other data on these surveys was positive.

Complaints received

Complaints for January to December 2019



In Q3 a total of 67 complaints were logged, a decrease on 76 received in Q2. Of these 11 were multi-agency complaints, 1 led by KCHFT, 6 by EKHUFT, 3 by MTW and 1 with Queen Victoria Hospital Sussex. 4 of the 68 cases related to end of life care.

Increase in survey volumes

Special Schools (Health and therapy service delivered in special schools to students with multiple physical disabilities, complex medical needs and including learning disabilities)
Following minimal feedback received over previous years from children attending special schools, the child/young people survey was revised by specialist staff within the service and re-launched in November 2019. The new shorter survey contains pictures and audio and to-date has been a success. The survey is available in paper format, on iPads and online for children/young people to complete with assistance. A separate survey is available for parents to complete.
32 surveys were completed by children in Q3 with a 100% overall satisfaction score.

Home First (joint venture between KCHFT (Community Neuro Rehabilitation, Home Treatment service, Hospital@Home, Intermediate Care Team, Pathway 2, Pathway 3, Rapid Response and the West Kent Cluster Therapy team), Hilton Nursing, Kent County Council and Maidstone and Tunbridge Wells NHS Trust)

Survey volumes for the Home first survey launched in early 2019 have steadily increased to 352 in Q3 compared with 247 in Q2, with a consistent overall satisfaction score of 96%.



Shout about it! – new survey for our patients' relatives and carers

KCHFT has a Commitment to Carers and to know if we are meeting this commitment it's important their feedback is captured. We engaged with local relatives and a survey was then re-designed and re-launched for use by all services on 15 July. The survey is available on the public website, can be accessed via staff tablets and has been added to all existing iPads. The survey has regularly been promoted in Flo mail and details are available on Flo.

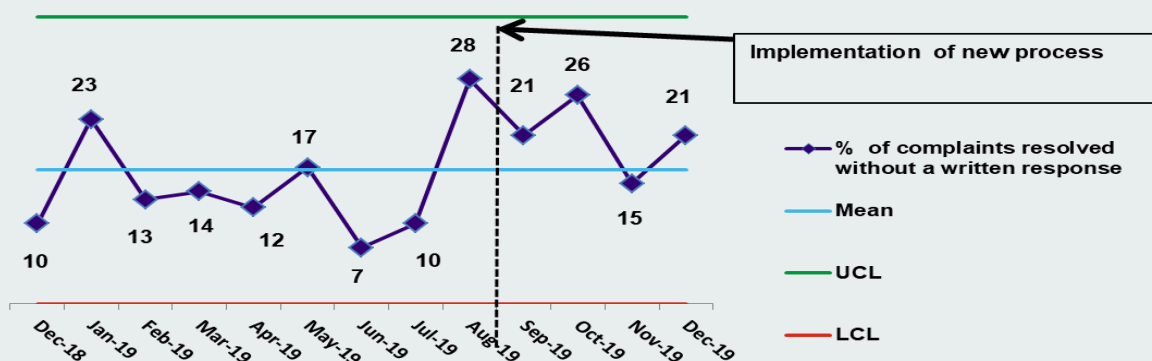
A total of 28 surveys were completed during Q3 within a variety of services with an overall satisfaction score of 89.5%. This is an increase in survey responses when compared to Q2 when 24 were received. This is an improvement in survey volumes when compared with the previous version of the survey, where 12 returns were seen in Q1. Faversham Cottage Hospital had the largest amount of survey completions in Q3 (14).

The question 'Did we offer you any information about support for relatives/carers' scored a low 72%. The feedback from carers will form part of a focussed piece of work on our Commitment to Carers during Q4.



New process – complaints resolved without written response

% of complaints resolved without a written response over a 13 month period



Since August 2019 staff have been encouraged to make contact as soon as possible with complainants to apologise, ensure they fully understand their complaint and to work towards an early resolution. This has shown a reduction in the need for written responses because complainants have had their concerns resolved.



New Bereavement survey

Feedback received from the Bereavement survey in place during 2018 received few responses and as a result, was revised in 2019. The revised version was created by the Patient Experience team with expertise from the Lead Practitioner of Palliative and End of Life Care, along with a process flow chart. The survey was approved at the End of Life Steering Group in October. The new survey was entitled 'Evaluation of Care in the last few days of life' and the flow chart will be presented to matrons' in January 2020 to discuss and agree the process, ensuring that bereaved families and carers have the opportunity to provide feedback.

The proposed process is that hospital staff will continue to send condolence cards to the family during the week after the patient's death and then the Patient Experience team will send a survey 8 to 12 weeks later. Staff will need to request and record a nominated NOK and their contact details to ensure the survey is sent to the family's chosen representative.



Patient Advice and Liaison Service (PALS)

During Q3 the team received 232 calls from patients who thought that they were calling the service having received an appointment letter. During the changeover from CIS to RIO, letter templates are being changed to make the service's telephone number more prominent. PALS also added information to their initial recorded message to highlight the need to call the service if a patient is responding to an appointment letter. Since these changes, the number of calls received has reduced considerably, 65 in November and 54 in December 2019.

During Q3 the PALS team received contact from a number of parents who had received emails from the Community Paediatrics service saying that their child was going to be discharged as a result of forms not being returned prior to an appointment. Parents said they had returned the relevant forms on time and had evidence of this. The service are investigating these issues and are taking action to avoid this reoccurring:

- The importance of the forms being returned by the recipient has been highlighted in bold. The emails should not be forwarded as this causes problems with the link
- Teaching staff at one particular school have undertaken to complete and return the forms via the original recipient link with the school secretary
- The service is looking into new ways of confirming receipt of these forms to ensure that parent's time is not wasted in the future



Mid-stay community hospital's inpatient survey

We completed a self-assessment against the NICE Guidance Patient Experience in Adult NHS Services QS15 (improving the quality of the patient experience for people who use adult NHS services), originally published in 2012 and updated in July 2019.

All patient feedback scored above 97% except for two questions on the community hospital mid-stay survey relating to Statement 2: People using adult NHS services understand the roles of healthcare professionals involved in their care and know how to contact them about their ongoing healthcare needs. These questions were:

Do you know who your named nurse is? and Do you always know the name of the nurse looking after you?

Following this, the current questions in the mid-stay survey were reviewed by the PEG members. It was felt that the 'named nurse' question is likely to be confusing for patients; some of the questions could be worded more simply and the survey is too long. Comments made have been incorporated into the revised version of the survey which will be discussed and agreed at the matrons' at meetings in January 2020.

You said we did – Community Nursing



A family member queried the escalation process to the GP for their relative's referral to the vascular team at the acute hospital.



A new process is in place whereby staff now photograph a patient's wound and refer to the trust's Tissue Viability team and Wound Medicine Centre for direct access to the vascular team. Concerns are also escalated to GP's. A flow chart has been produced for staff to provide guidance on exposed tendons/bones.



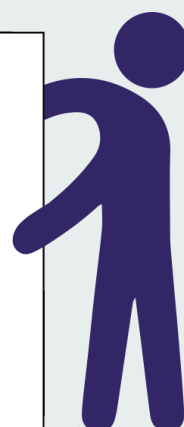
You said we did – School Health (Kent)



The wording of the National Child Measurement Programme letter caused some parents to doubt whether their child had a healthy diet and lifestyle.



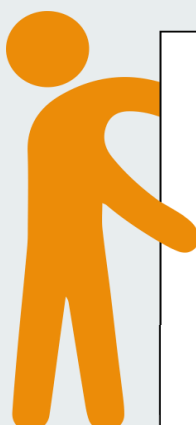
The letter was reviewed, appropriate changes made to the wording and a body mass index (BMI) graph added to provide more clarity.



You said we did – Rapid Response (west Kent)



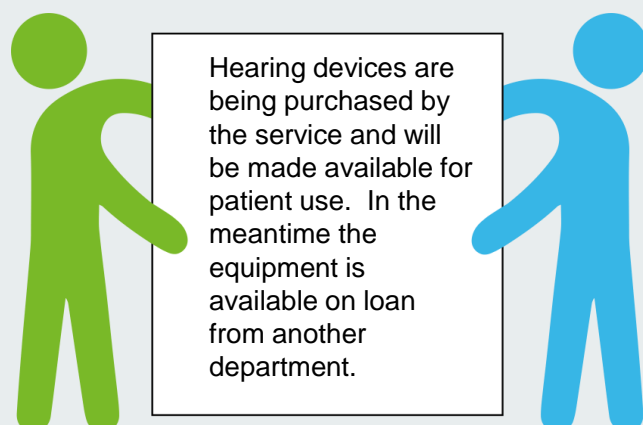
A family member was concerned about the number of visits their relative had received and had not felt included in the care and discharge plan.



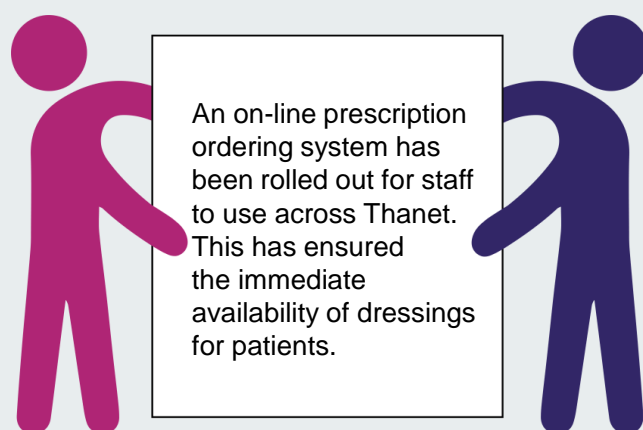
Staff now give all patients a service leaflet and telephone call in the morning to give them an idea of a visit time. The need to involve patients and their families in care planning has been re-emphasised. Geographical working across the teams has been introduced to ensure staffing resources are used as effectively as possible.



You said we did – Pulmonary Rehabilitation Service



You said we did – Community Nursing, Thanet



You said we did – Community Hospitals (east Kent)



This is how hospitals should be. My wife had to use the services of the walk in centre late and just before they closed but the staff, nurses and receptionist stayed after their shift ended to ensure she received excellent treatment with a smile.

Minor Injury Unit, Folkestone

We just wanted to say a MASSIVE THANK YOU to everybody in the team for the support and care shown to my father. You always showed tremendous patience with Dad throughout. For making him comfortable and not messing him about unduly by listening to his needs. The work you have done has ultimately allowed him to pass peacefully at home with dignity. We do not take for granted the pressure you are all under and we saw first-hand the long days and hours you endure but at no time did those pressures translate into your dealing with Dad only compassion and care shone through. You have all been, incredible, amazing and we really cannot thank you enough. In fact words really don't do justice to the work you do or the way in which you all do it. Thank you. Our very best wishes.

Rapid Response Team, Maidstone

You truly have 'magical hands', as one of your colleagues stated, with great skill, knowledge and brilliance have you given me nicer looking feet than I have ever had as an adult. I sing your praises to everybody. You are a wonderful consultant, and obviously passionate in what you do so successfully and effectively. I was extremely fortunate to have you as my medical practitioner and I want to thank you from the bottom of my heart. You have given me the confidence to work harder at my walking distances. I have come along really well anyway, and will continue to do so. This has been a long and difficult journey for me, but I now believe I will get there.

Podiatric Surgery - QVMH Day Surgery Suite



When I first came to you I'd been batted around for months and made to doubt my own sanity which in turn caused issues with my sanity. Within our first session you'd explained the physical issue and eased my mind. You'll never know how much this simple thing impacted me, and in turn, my wife. I found the therapy difficult, both mentally and physically, but you helped me through. I'll always laugh if someone mentions their Mum and Marmalade in the same sentence as it reminds me of feeling ridiculous, yet growing in power as I progressed. You've helped me speak again and for that you have my eternal gratitude. I hope you like the book and mug. The book got me through a really tough period in my life, just as you have, and I hope one day it helps you. You've made such a difference to our lives and given us our first anniversary where my wife could hear me say I love her. Thank you.

Adult Speech and Language
Therapy - Tonbridge and
Malling

It has been a long journey I think we can both agree. Before your sessions I didn't know who or how to speak upon my problems and mostly how to cope with them, so thank you. You have a heart of gold and everyone that attends your sessions are so lucky. Every Monday has been turned into something I really look forward too. So I'm defo going to miss you and our chats. I will reach out to you if I need to but thank you again for your endless support, kindness and love.

Child and Adult Therapy Service,
Swale

Appointment received quickly, time given for patient who is deaf, staff made adjustments i.e. looking directly at patient when talking, talking slow and clear removing mask and visors when talking. Very caring staff. Appointment not rushed, every detail explained.

Dental Services,
Five Elms, Outer North
East London





Title of Meeting	Council of Governors
Date of Meeting:	15 January 2020
Agenda Item:	2.5
Subject:	Patient and Public Engagement
Presenting Officer:	Louise Norris, Director of Workforce, OD and Communications

Engagement report October – December 2019

Executive Summary

This report gives an overview of public and patient engagement, membership engagement and volunteer services during quarter three (1 October – 31 December 2019)

Introduction

It provides assurance the trust is engaging with patients and the public including:

- those we find harder to reach
- ensuring everyone has a voice
- patient, carer and public involvement in service improvement.

The Communication, Engagement and Patient Experience strategy 2019 to 2022 includes measurable objectives relating to patient, carer, public and staff participation in shaping services and working towards embedding co-design principles in all that we do. Plans include working with patients and carers to develop an 'introduction to co-production and working together workshop' for staff, patients and carers, developing a toolkit to provide guidance for staff on the process for involvement, ensure patient experience feedback is acted upon at all times and increase the number of patients and carers involved in the development of services.

This report provides an update on progress against the goals and objectives.

KCHFT Engagement Team
January 2020



Communication, Engagement and Patient Experience strategy

Goal

Prevent ill health: Take every opportunity to give people and the public information that is relevant and accessible, which supports them to stay well or recover faster.

Objective

Ensure patient information is accessible and conforms to AIS national standards throughout and that services are supported to communicate effectively with patients and carers, with additional needs.

Tasks and progress

Develop new specification for interpreting and translation services.

Carry out tender and award new contract by June 2019.

As detailed in the previous report, the new contracts to support the trust with an interpreting and translation service have started.

Top 10 languages requested for face-to-face and telephone interpreting provided by our suppliers from October 2019 to January 2020:

Face to face interpreting	Telephone interpreting
Languages:	Languages:
(1) Bengali	(1) Kurdish Sorani
(2) Slovak	(2) Slovak
(3) Romanian	(3) Arabic
(4) Polish	(4) Vietnamese
(5) Punjabi	(5) Romanian
(6) Turkish	(6) Albanian
(7) Arabic	(7) Nepali
(8) British Sign Language	(8) Dari
(9) Russian	(9) Polish
(10) Czech	(10) Czech
Bookings made for face-to-face interpreting	
October -19	376
November -19	385
December -19	386
Bookings made for telephone interpreting	
October -19	59
November -19	103
December -19	42

Work with NHS and voluntary organisations, services and community to improve access to services for people with a disability, sensory loss or impairment.

NGT (Next Generation Text) app to help people with hearing and speech impairments to communicate over the phone using a confidential Relay Assistant is still in the planning stage. Guidance is being designed for staff to help install and use the app. This information will be used and trialled when testing it further with specific services.

Kent County Council (KCC) sensory and autism services are investigating why no-one from the deaf community registered for the **bespoke diabetes courses** for deaf patients this year. Using the feedback, KCC will decide, with the Specialist Diabetes Team, what to do in 2020.

Following a complaint from a deaf community member, who found it difficult to access the One You service, a project group was set, involving KCHFT, One You, Kent County Council and the deaf community. Since then, the One You service has seen more deaf clients. In 2018/19, the service saw a total of 15 deaf clients.

Between April 2019 and September 2019, the service had already seen 14 deaf clients.

Monitor uptake of AIS E-Learning and logging of AIS needs on CIS.

AIS E-Learning: 740 colleagues completed AIS E-Learning.
Due to the trust electronic patient record system changing from CIS to RIO, we do not have data for the quarter to show what AIS requirements were recorded for patients and carers. A full update will be available in the next quarterly report.

Browsealoud statistics

The Browsealoud tool on our public website provides support with speech, reading and translation when accessing information on our website. This is free to use and available to everyone. During the last quarter the toolbar has been accessed by public and patients as follows:

2019	Speech	Toolbar	Simplify	Translate	Text magnifier	MP3	Settings
October	2112	3886	12	225	14	1	16
November	2581	4047	9	235	5	4	19
December	1188	1273	3	104	9	2	6

Figures compared to this time last year:

2018	Speech	Toolbar	Simplify	Translate	Text magnifier	MP3	Settings
October	234	218	6	3	4	2	0
November	736	247	4	1	3	2	5
December	334	235	0	33	2	0	0



Additional tasks and progress

Test our Easy Read advice sheets with people with mild to moderate learning disabilities from East Kent Mencap.

This quarter we tested and/or revised the following documents with East Kent Mencap, changes were made to the wording and the images to reflect feedback from clients with a learning disability:

- Podiatry leaflet and nail surgery leaflet – colleagues from the podiatry service are reviewing this before it is published for use.
- Generic appointment letter template and generic invitation letter template – this has been published on flo and the public website for all services to use for clients requesting Easy Read

Documents that are in production or waiting to be tested:

- STP five-year plan summary – this has been extended and the additional information will be tested by East Kent Mencap on Tuesday, 21 January 2020.

We have arranged a meeting with North Kent Independent Advocacy Scheme on Wednesday, 8 January to start testing Easy Read advice sheets with its clients to ensure that our resources are tested and appropriate for clients with a learning disability.

We have been in contact with Aspens to arrange a focus group with their clients (two Easy Read examples are included in the appendices to this report, an appointment letter and a meeting letter); to ensure that our resources are tested and appropriate for clients with a learning disability.

Goal	Deliver high-quality care: Establish a culture of co-production to ensure a range of voices help shape the development of high-quality services.
Objective	<p>Establish a culture of listening to and involving patients and carers as equal partners in shared decision making. Embed the principle of co-design across the trust.</p> <p>All KCHFT services are able to easily access patient representatives for feedback and co-design purposes.</p>
Tasks and progress	
TASK We will plan and deliver a recruitment drive to increase the number of patients and carers involved in the development of our services year-on-year during the lifetime of this strategy.	
<p>We continued to promote PEN membership at local events and meetings during the last quarter.</p> <p>There was an increase in patients and public representation at the local Patient Engagement Groups (PEGs). Volunteers are taking a more proactive role in the meetings, and providing feedback on observations and anecdotal feedback. For example, volunteers are giving feedback on the food and menus on the wards, helping with the mid-point surveys and discharge surveys prior to discharge.</p> <p>Volunteer involvement has increased the number of surveys completed, which is an agenda item at PEG meetings. Volunteers bring along ideas and suggested items for purchase for the patients activities in the day rooms. In Tonbridge, the league of friends have given an amazon card directly to the volunteers for them to purchase small items for use in the day room up to value of £30 and the volunteers liaise directly with the league.</p> <p>Our annual ‘thank you’ event for PEN members took place in November. PEN members were invited to an afternoon cream tea to celebrate their support and commitment in working with us, in developing our services.</p> <p>The event was attended by more than 20 people, including our members from East Kent Mencap and North Kent Advocacy Service, who support us to develop our Easy Read literature; and also attend PLACE inspections.</p>	
TASK We will review and reshape the current system for patient engagement – PAGs, PENs etc – to ensure appropriate membership and consistency and that all services are able to easily and effectively engage with patients and the public in a meaningful way.	

PLACE (Patient-led Assessment of the Care Environment) inspections.

The inspection team is made up of members of staff, KCHFT governors, members of the Patient Engagement Network and other interested people who use services or care for people who use services.

These hospital sites were inspected:

Hospital site	Number of patients and public representatives involved
Deal	5
Herne Bay	5
Whitstable and Tankerton	5
Faversham	5
Hawkhurst	5
Edenbridge	4
Sevenoaks	5
Tonbrige	5
West View	5

All patient and public representatives will be invited to attend a workshop early in 2020 to discuss, results, feedback and presentations from the PLACE inspections. Information from the workshop will be included in the next quarter Council of Governors' report.

The number of Patient Engagement Network (PEN) members at end of October was 36 compared to 37 in September. This **follows an exercise to identify inactive PEN members.**

East Kent Patient Engagement Groups (PEGS):

- Meetings take place once every quarter.
- Meetings for the PEGs in east Kent have now all taken place.
- There will be an **emphasis on increasing the membership** of these meetings, both of staff and patient and public representation.

Notable highlights from the PEG meetings this quarter.

Deal PEG

- A project for the garden area at the hospital to be set up. This will be to tidy up and raised beds to be erected. **Patients, carers and public will have the opportunity to be involved in the planting.**
- The PEG will be choosing art work for the new, refurbished dementia ward.
- Patients and carers to be involved in refurbishing the day room.
- Dining companions being sought for patients to be encouraged to eat.

Faversham PEG

- New PEN leaflets to be distributed in patient exit packs and the end of stay survey, to **encourage patients and carers to attend and get involved.**
- Discussion around day room refurbishment and that it needed to be a comfortable area for patients to spend time with their relatives. Staff will **ensure patients and their families are** involved.
- Ideas were discussed to **improve patient experience on the ward:** **Suggestion box for patients and carers** to suggest ideas about activities they would like to improve things on the ward and an iPad on the ward to access online activities.

Hawkhurst PEG

- Patient confirmation activities are going well and **patients feel occupied.**
- **Low number of relative and family surveys being completed.** Allocated member of staff to concentrate on promoting the surveys.
- Fully staffed and awaiting cook to be transferred from Sevenoaks. Feedback from patients confirmed **food was very good and portion size adequate.**

TASK We will co-design and deliver, with patients and carers, an “introduction to co-production and working together” workshop and toolkit for staff, patients and carers, to embed the principles and ethos of co-production and design; introducing the toolkit across the trust and to raise awareness of the Engagement Team and its role and function.

A **co- designed training session has been developed**, delivering trust-wide to colleagues, patients and carers. The training focuses on patient and carer involvement, why it is important and how to overcome barriers.

First-level training will provide colleagues with a toolkit, enabling them to effectively engage and involve patients and carers in service improvements and developments.

The **first session of the training** was delivered on 12 December to a group of managers from health visiting teams. Overall, feedback from the session was very positive and confirmed that participants found the training informative, interesting and much needed and **felt more empowered to involve patients and family carers in their work to develop services**. The training will be available for all colleagues from January 2020, details to be confirmed.

Bite size patient involvement training

A **less intensive version of the training** has also been developed, and been included in local induction training for new healthcare assistants (HCAs) in east Kent, as part of a **quality improvement objective** to promote patient and carer involvement.

The session includes personal stories from a patient and a carer who talk first-hand about their experiences. **This is the first time that patients and family carers have been included as co-presenters in a training session**. The sessions will continue to be delivered throughout 2020 on a quarterly basis.

Feedback from the training has been extremely positive, with **colleagues stating that the training has been really impactful**, giving an **insight in to patient involvement and the impact of being a carer** and how this can affect relationships with professionals and family members.

TASK We will co-develop patient and carer engagement champion roles, to support and increase patient and carer participation across the trust.

Following feedback from PEN members, we **scheduled quarterly informal meetings** of the PEN through 2019 and two meetings have now been held.

Notable outcomes:

- Feedback from meetings that patients, public and carers attend and how their **involvement has impacted** on service change.
- Feedback from the Engagement Team about up-and-coming **involvement opportunities** and a report on Engagement Team initiatives and work plans.
- Overview of quality improvement (QI) and **opportunities to be involved in QI** initiatives, from Sarah Donovan, Head of Service Improvements

Trust Patient Experience Group

A questionnaire has been developed to ascertain the impact of the group how involving patients and family carers have impacted on service development. Results from the questionnaire will be discussed at the next Trust PEG meeting in January 2020

TASK We will promote understanding of why equality monitoring helps us to deliver patient-centred care by working with IT and the Electronic Patient Record (EPR) Action group to include mandatory monitoring questions and by an internal communications campaign.

Leaders' Conference 8 October 2019.

A half-day conference for senior leaders and leaders within KCHFT focussed on equality and diversity. More than 200 leaders attended the event and more than 80 per cent of attendees thought it was **relevant or very relevant to their job**.

We are working closely with the team introducing the new patient record system for the trust (Rio) and have made contributions on the importance of equality monitoring.

Additional tasks – Beside You breastfeeding campaign engagement

Beside You was initially developed by Medway Council and Best Beginnings in 2016. It will be relaunched as a Kent and Medway resource jointly by KCC, KCHFT, Medway Council and Medway Community Healthcare in January 2020. The campaign aims to support and normalise breastfeeding in Kent and Medway.

During the latter part of 2019, we surveyed to see what people found useful on the existing site and what sort of information we could add. In all, **75 responses were recorded**. We attended breastfeeding area meetings and **spoke to professionals** about the campaign and what they would like to include. This resulted in changes made to the website images and wording to reflect the support available.

Once the website had a draft version, **we took this to an antenatal group, a peer supporter volunteer training session, two breastfeeding support sessions, a health visitor drop-in and children centre reception, to gauge people's opinions and test the usability of the site.**

One service user, a previously strong opponent of KCHFT health visiting services being allocated the contract for breastfeeding support, gave the following feedback:

The website is lovely, I'm really pleased that the images are now more diverse, this is fantastic especially recognising that women from different cultures may feel differently about feeding with a cover. I am also pleased that a page about tongue tie has been added. I think the website has a lovely, encouraging feel to it. It's not preachy and it's just so positive. I also like that older babies are featured, too. Please give my compliments on a great website to the team who have made it, I think it's wonderful.

We also did a presentation at the LMS, and sent this out to all the infant feeding leads in maternity and maternity voice partnerships in Kent and Medway as well as sending the site out to our own staff, and other organisations including Medway Council, KCC, PSB and LLL who all offered useful insights as well.

In the future we would like to do more testing now the site is live and has the Browsealoud feature installed with different communities – Roma for example - to understand how the translation is working and if we can include anything particularly relevant for them.

The site is live now at www.wearebesideyou.co.uk.

Goal	Integrate services: Support a climate for change by building relationships and mechanisms to support partnerships and system transformation.
Objective	Ensure KCHFT colleagues and its patients' voices are heard and demonstrate how their feedback shapes the future of the STP.
Tasks and progress	
Promote individual elements of the STP, such as stroke consultation, as they emerge from the partnership.	
No report for the quarter, although we continue to share and engage with social media posts from the STP, as they are produced.	

Goal	Develop sustainable services: Ensure our colleagues, patients and the public are kept informed, involved and feel valued.
	Enhance the trust as a place to work.
Objective	Increase year-on year the number of patients and public who say they feel informed, involved and valued.
Tasks and progress	
TASK Increase partnership working with our stakeholders and partner organisations, so we can promote opportunities to work together to improve services, for example events.	
<p>All members and colleagues were invited to attend the 'Let's Discuss Dementia' event in Thanet on Tuesday, 15 October.</p> <p>Staff Networks Conference 2019 Held on 22 October, it included presentations from Paul Deemer, Head of Inclusion at NHS Employers, about the importance of inclusive practice when seeking to employ people with disabilities. Around 40 people attended the conference.</p> <p>Feedback included:</p> <ul style="list-style-type: none"> • <i>It was absolutely brilliant, excellent honest and illuminating speakers, vital topics and very encouraging.</i> • <i>Excellent presentations from key members of the networks.</i> • <i>The day was amazeballs. This was my first network event, and it made me want more!</i> <p>CYP public health/sexual health workshop at Oasis Academy. We engaged with young service users. Please see full report in the appendix.</p>	
TASK Provide the opportunity for our public members to regularly meet to share experiences, identify opportunities and to promote their work.	
Members were invited to 'Let's Discuss Dementia' event, as above.	
TASK Increase representation from carers and representatives from Carers' organisations on KCHFT's Patient Experience Group and local PEGs.	
There is a carers' organisation on the trust's Patient Experience Group. We are in the process of encouraging carers to join the relaunched patient experience groups at community hospitals. We will be looking to provide a focus on young carers by linking in with appropriate networks in 2020.	

Membership strategy

Objective

To continue to recruit public members in order to ensure our membership reflects the population that we serve.

The trust's public membership at 23, December 2019 was 8,390. Of the membership:

- 734 are from Black, Asian or minority ethnic communities (8.8 per cent)
- 146 are aged 21 or under (1.7 per cent)
- 932 are aged over 75 (11.1 per cent)

Month	Joiners	Leavers*	Net	Cumulative
October 2019	16	5	11	8,343
November 2019	35	4	31	8,374
December 2019	24	8	16	8,390

**Leavers include public members who have requested to be removed from the database and deceased members.*

Objective

To ensure members know who their local governor is, what they do/their role and why and how to contact them.

551 public members in Dover and Sevenoaks received their local governor newsletter by email. Open rates of 33.8 per cent for Dover and 34.1 per cent for Sevenoaks. No replies received.

865 public members were invited to attend winter COG meeting. Adverts also placed for members of the public via networks and on social media platforms at INVOLVE, Healthwatch Kent, Kent CAN and Kent Carers Matter.

Objective

To provide members with accurate information about our services and how to improve their own health and wellbeing.

3,846 public members were sent the winter Community Health Magazine by email and asked to give their feedback on the magazine.

Let's Discuss Dementia - Thanet

On Tuesday, 15 October we held a third let's discuss dementia event in Thanet. Public members in east constituencies were invited by email and flyers and adverts via social media and community networks were shared. All staff members invited to attend via flomail and flo. More than 50 public members, stakeholders and colleagues attended the event.

Objective	Increase opportunities for members to feedback on service improvements.
	Nothing to report for the quarter.

Volunteer strategy	
Goal 1	To increase the number of volunteers in key services to enhance patient and staff experience.
Tasks and progress	
TASK To identify and target services where there is the greatest need for volunteers; increasing the number of volunteers who provide key roles like 'meet and greet' and dementia volunteers and developing new volunteering roles, for example, for the trust's charity i care and mystery shoppers	
<p>The dining companion' campaign resulted in four new volunteers ready to start at Victoria Hospital Deal, and Queen Victoria Hospital, Herne Bay.</p> <p>Two new volunteers started in cardiac rehabilitation in November at Hartsdown Leisure Centre and three new cardiac rehabilitation volunteers started at the Stour Centre Ashford and Kingsmead Leisure Centre Canterbury in December</p> <p>A new breastfeeding volunteers' cohort started in December in Birchington Children's Centre, with 11 new volunteers.</p> <p>New identified volunteer roles:</p> <ul style="list-style-type: none"> • MSK team at Sevenoaks Hospital to help with Hydrotherapy Therapy Team at weekly sessions. • Sundown Café volunteer to support cognitively impaired patients who may be agitated or confused at dusk and evening mealtime. • Meet and greet volunteers in baby clinics in Tonbridge and Tunbridge Wells . 	
TASK Recruit volunteers for new services or locations, and increase the number of volunteering hours (2% increase year on year in volunteer hours).	
<p>Total volunteer hours 4,000 (4,200 previous quarter), but this does not include hours for the health walk leaders. Number of active volunteers 502 (480 previous quarter) recorded on MES. This includes:</p> <ul style="list-style-type: none"> - 88 breastfeeding volunteers - 199 health walk volunteers - 11 EPEC volunteers - 35 PEN volunteer - 169 other volunteers in various roles across KCHFT sites. 	
Goal 2	To support, train, engage and retain volunteers so they have a positive experience of volunteering with us.
Tasks and progress	

TASK Provide a range of high-quality information about their role; what is expected of them and where they can find out more. Offer training opportunities that develop our volunteers. Act upon volunteer feedback to improve their volunteering experience and satisfaction and develop a reward and recognition scheme for volunteers.

Information is given to volunteers via MES database about training and awareness sessions, plus invitations to events and PEG meetings, as well as regular information bulletins. The autumn newsletter was distributed in October via MES and post, plus published on the trust's website (hard copies also available).

Several thank you messages received by volunteers, including one from Pat Smyth at Faversham Hospital:

*To
All in the Voluntary Engagement Team Office*

Have a magical time

*Just to say a big thank you to you all for
the very good service you have provided this year
It is very much appreciated the support you
provided to me, Such an excellent team — Well done
to you all.*

Regards Patricia Smyth (Faversham Cottage Hospital).
XX

Training:

Two end of life awareness sessions were held, especially for volunteers in community hospitals with patient-facing roles. During one, volunteer John shared his experience of end of life care when his wife died. John will now be part of a training video to share with staff. Two more end of life sessions will be held in 2020.

Safeguarding and Prevent training given to breastfeeding and EPEC volunteers in October and November.

Provide regular updates to volunteers on the trust and the added value volunteering brings and support staff to effectively involve volunteers.

We continue to train and support breastfeeding volunteers. Congratulations to the new breast feeding volunteers of Shepway and Swale who had their joint graduation celebration on Thursday, 12 December at the Village Children's Centre, Folkestone. The volunteers are valued not only by the parents that they support but also the health visiting teams.

VOLUNTEER APPRECIATION

We hosted a coffee morning at Sittingbourne Memorial Hospital on 5 December 2019 to thank our volunteers. Volunteers attended from several services, including health walk leaders, administrative support, meet and greeters in community hospitals and epilepsy services.

Goal 3

To establish a reputation for excellence in volunteering and explore partnership roles to ensure we achieve a more diverse pool of volunteers who better reflect our population

Tasks and progress**TASK Communicate the quality and impact of volunteering at KCHFT and the difference it makes**

All volunteer vacancies are advertised with HELPFORCE nationwide and local volunteer centres and via their website. We also link with KCC and Kent Supported Employment, IMAGO Kent-wide and Strong Kent Communities organisations, East Kent MENCAP and North Kent Advocacy service.

TASK Make it easy to access volunteering opportunities at KCHFT; increase the volume and diversity of our volunteer team through targeted recruitment campaigns; explore partnerships to grow the volunteer base in health and social care

New volunteering services recruitment, induction and training documentation was updated and published on to the website in October 2019.

Professional appearance guidance has also been reviewed and published for volunteers, especially for the breast feeding volunteers who will soon be receiving new polo shirts as part of their breast feeding support role.

Between October and December, we received 54 enquiries about volunteering and work experience, mostly via our website.

In partnership with Kent Supported Employment (KSE) and Kent County Council, we placed two volunteers with the community paediatric services at Coxheath



Address line one
Address line two
Address line three
Address line four
Postcode

Date

Dear xxxxx,

Photo of
clinician

My name is xxxxxxxxx.



I am a xxxxxxxxxx.

Contact the
Engagement
Team for a
calendar picture

I would like to meet you on day, date month
year.

Contact the
Engagement
Team for a
clock picture



Time: XXX

Place:

Address line 1

Address line 2

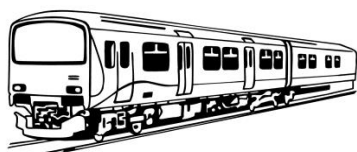
Address line 3

Postcode



We will talk about:

- XX
- XX
- XX.



Travel information:

- Parking is available at xxxxxxxx.
It costs £0.00.
- The closest train station is xxxxx.
- The closest bus stop is xxxxx.



If you have any questions please contact us by:



Email: xxxxxxxx@nhs.net



Phone: xxxxx xxxxxx



Text: xxxxx xxxxxx



Please tell us if you need help when you visit us, for example:

- large print information
- easy read information
- interpreter
- other help.

Photo of
clinician

From

xxxxxxxxxxxxxxxxxxxxxx (Name)

xxxxxxxxxxxxxxxxxxxxxx (Team/department)



Contact the
Engagement
Team for a
picture

Address line one

Address line two

Address line three

Address line four

Postcode

Date

Dear xxxxx,

You are invited to xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx.

At the meeting we will talk about:

- xx
- xx
- xx.

Contact the Engagement Team for a calendar picture

Contact the Engagement Team for a clock picture

Contact the Engagement Team for a clock picture

When: day, date month year.

It **starts** at xx.xxam/pm.

It will **finish** at xx.xxam/pm.



Contact the Engagement Team for an area picture

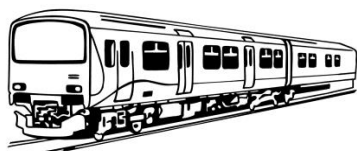
Where:

Address line 1

Address line 2

Address line 3

Postcode



Travel information:

- Parking is available at xxxxxxxx.
It costs £0.00.
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There will be tea and coffee for you.



Please let us know if you can come:



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- interpreter
- other help.



Photo of
clinician

From

xxxxxxxxxxxxxxxxxxxxxxxx (Name)

xxxxxxxxxxxxxxxxxxxxxxxx (Team/department)

Children and Young people's forum

Oasis Academy

December 16 2019

The purpose of the forum was to consult with teenage girls regarding our sexual health services and how easy/difficult they are to access.

Present:

- Nicola Merchant – Teacher (Health and Social Care)
- Liz Crosley (Sexual Health, KCHFT)
- Louise Davis (Sexual Health, KCHFT)
- Juliette Wales (engagement team KCHFT)
- Seven year 11 girls from Oasis Academy, Isle of Sheppey.

We introduced KCHFT and explained community health care.

Public health questions – split into two groups to discuss where CYP feel comfortable going for support or advice for physical or emotional health needs.

CYP discussed where they would turn to for support or advice:

- most say mum or GP
- they would not go to pharmacist as it is not private, unless they have a cold
- they would not google, as google will tell them they will “die by the end of the day”
- the most important thing is confidentiality.

Request for us to use texting as our main way to let CYP access services.

Most CYP have unlimited texting as part of their phone package, however data is limited. No Wi-Fi at home. They would not want to use up their data for health care issues. Really important for them to use a system where they can delete records of conversation as they can from their phone. Texting they can do this and feel in control.

Liz Crosley introduced Sexual Health QI project.

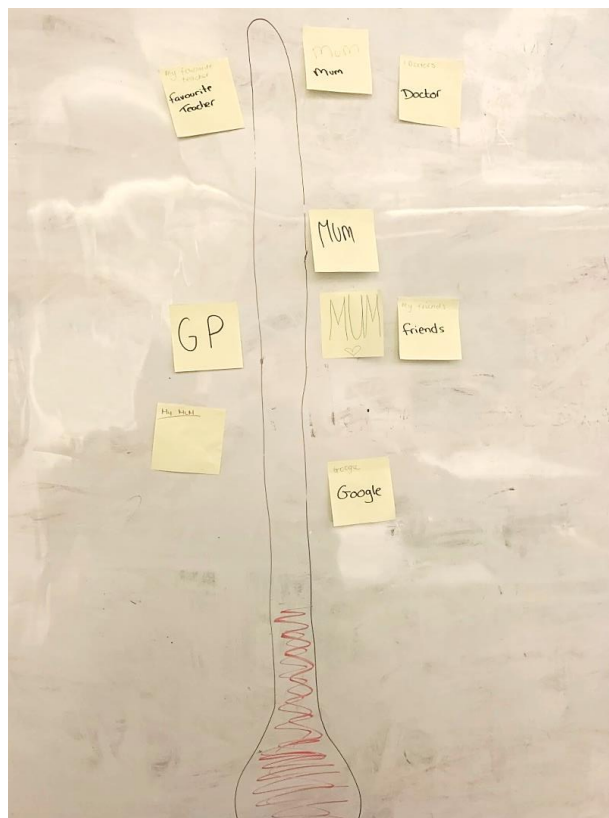
Two Sexwise videos shown:

<https://www.youtube.com/watch?v=LkCQYaFIPzY>

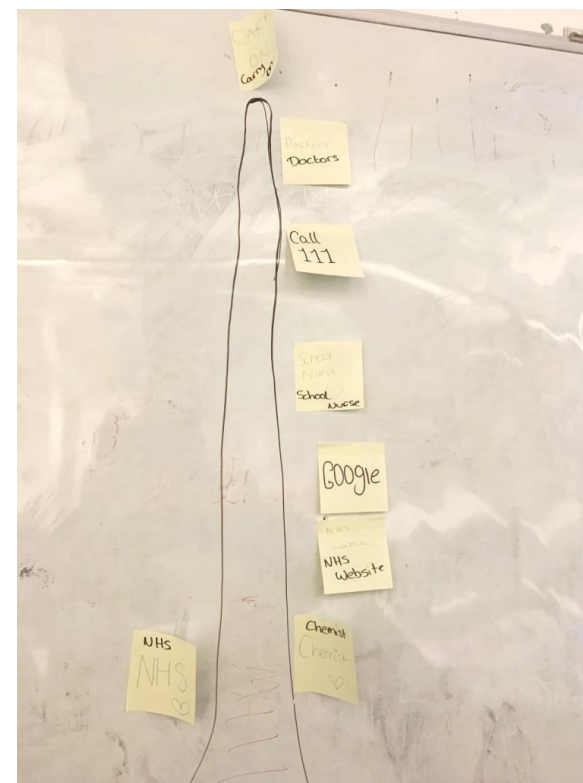
<https://www.youtube.com/watch?v=yvVB7iRTcBM>



Kent Community Health
NHS Foundation Trust



Methods of getting support or advice that they felt MORE comfortable with. Hottest part (top) = most popular.



Methods of getting support or advice that they felt LESS comfortable with.



Our values Compassionate Aspirational Responsive Excellent

www.kentcht.nhs.uk

Preferred methods to access advice or support for sexual health issues.

A teacher, school nurse, anyone at school would be the **least likely** place to get support for a sexual health issue.

They are not aware that there is a KCHFT school nurse but they have an internal paid “nurse”. The internal paid “nurse” is just someone who they would go to for a headache not emotional support.

They would never talk to a school nurse, as the school nurse would ring their parents and tell them. They know this because this is what their internal “nurse” does. Agreed that at the next session a school nurse will feedback on this discussion (at a previous introduction to this group we had been told that none of them knew what CHAT Health was).

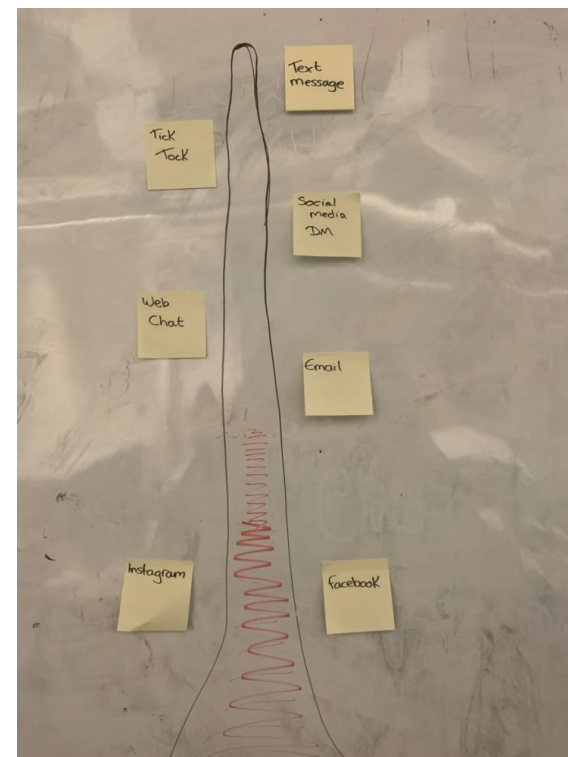
YP present did not use webchat, and seemed unaware of it. They no longer use Instagram (old like facebook) and mainly use snapchat and TicTok. They would be happy to access materials around health on TicTok.

Clover street video was shown.

<https://www.youtube.com/watch?v=K7m6bTP6N1E>

The CYP liked that you could give a number or a first name at the clinic. They do not want to have to call and speak on the phone. Speaking to a member of staff who identifies as the same gender as the CYP was important, as well as being able to speak to them in private about why they are at the clinic.

Webchat was introduced. The CYP had not used webchat and did not like that there would be a trace of their conversation on the browser. They said that they could delete a text. It was pointed out to them that they could delete their browser history as well. They did not seem aware or to have thought about this.



We were invited back in February or March but not after as CYP would be focused on exams.

The CYP really want us to return and feedback to them so they know what impact their 1 hour of time has had.

Learning from the session:

- CYP are affected by digital poverty just like their parents. With no Wi-fi at home data is in real shortage and so they are unlikely to use web based options.
- These girls were less technologically focused then we imagined – they had never heard of webchat and did not know they could clear their browser history.
- Texting was their preference, as they had unlimited texting in their bundle.
- They believe that the school nurse will tell their parents anything they say. This is complicated by the fact that they also have a school paid for “nurse” and so it would be hard to make a distinction if there was a difference in approach. They do not know about KCHFT school nurse or CHAT health. They do not think that the school nurse has a remit beyond deciding if you can go home if ill or prescribing a paracetamol,
- Mum was the most popular source of information or support in most cases.

Title of Meeting	Council of Governors
Date of Meeting:	15 January 2020
Agenda Item:	2.7
Subject:	Freedom to Speak Up
Presenting Officer:	Joy Fuller, Freedom to Speak Up Guardian

1. Purpose

The purpose of this paper is to inform the Council of Governors of the Freedom to Speak Up arrangements in place across the trust.

2. Background and Context

Every NHS trust and NHS Foundation Trust is mandated to have a Freedom to Speak Up Guardian, and there are now 500 Guardians in place across NHS organisations in England¹. The Guardians are part of a network supported by the National Guardian's Office (NGO) which was created to support positive cultural change across the NHS. The NGO is an independent, non-statutory body which provides support and training for Guardians, as well as disseminating good practice, undertaking case reviews and providing challenge across the system.

The NGO and the role of the FTSU Guardian was created in response to recommendations made in Sir Robert Francis QC's report "The Freedom to Speak Up" (2015). The recommendations were made as Sir Robert found that NHS culture did not always encourage or support workers to speak up, and that patients and workers suffered as result.

Kent Community Health NHS Foundation Trust has a Freedom to Speak Up policy which is in line with the national policy. The policy says that staff should initially try to raise concerns with their line manager or a more senior manager, but if this does not lead to satisfactory action, or if the staff member feels unable to do so for whatever reason, they can contact the FTSU Guardian for advice and support. It is all in support of creating a more open culture that puts patient and staff safety at the heart of what we do.

3. The Role of the Freedom to Speak Up Guardian

The FTSU Guardian helps to raise the profile of raising concerns across the trust, and provides confidential advice and support to staff, agency workers or volunteers about concerns they have and/or the way their concern has been handled. The Guardian ensures that people who speak up are thanked for doing so.

The FTSU Guardian remains impartial and ensures that a fair and timely investigation into concerns takes place and that outcomes, actions and learning are shared. They don't get involved in investigations or complaints, but help the process. They have a key

¹ Source: Freedom to Speak Up Index Report 2019

role in making sure staff do not experience discrimination or are victimised because they raise a concern.

The FTSU Guardian can be contacted via a dedicated email address or phone number. There is also a dedicated page on FLO, the trust's staff intranet site, which provides guidance on speaking up for staff and managers.

There are currently nine Freedom to Speak Up Ambassadors in place, who work in different services across the trust. The Ambassadors work alongside the Guardian to promote the speaking up culture, and provide another source of support and guidance for staff.

4. Summary of cases raised in 2019/20

Quarter	Number of cases raised	Types of cases raised
Quarter 1 (Apr 2019 - Jun 2019)	1	<ul style="list-style-type: none"> • Bullying and Harassment
Quarter 2 (Jul 2019 - Sept 2019)	3	<ul style="list-style-type: none"> • Bullying and Harassment • Patient Safety • Perceived Detriment
Quarter 3 (Oct 2019 - Dec 2019)	4	<ul style="list-style-type: none"> • Perceived Detriment • Patient Safety

5. Freedom to Speak Up Index Report 2019

Background

In September 2019, the National Guardian's Office published the 'Freedom to Speak Up Index Report 2019'. The Index identifies the view of staff on the speaking up culture in all NHS Trusts and NHS Foundation Trusts across the country. The index calculations were based on the mean average of responses to four questions in the 2018 annual staff survey. The survey questions used were:

- % of staff responded "agreeing" or "strongly agreeing" that their organisation treats staff who are involved in an error, near miss or incident fairly (Q17a).
- % of staff responded "agreeing" or "strongly agreeing" that their organisation encourages them to report errors, near misses or incidents (Q17b).
- % of staff responded "agreeing" or "strongly agreeing" that if they were concerned about unsafe clinical practice, they would know how to report it (Q18a).
- % of staff responded "agreeing" or "strongly agreeing" that they would feel secure raising concerns about unsafe clinical practice (Q18b).

Assessment

The current FTSU Index for Kent Community Health NHS Foundation Trust is **81%**. The national median FTSU Index for Community Trusts is 83%, and there are currently 10 community trusts across the country with a higher index score.

A copy of the Index report can be found here: <https://www.nationalguardian.org.uk/wp-content/uploads/2019/10/ftsui-index-report-2019.pdf>

6. Forward Plan

The current FTSU Guardian has been in post since September 2019. A forward plan has been developed and is summarised below:

- To maintain and work towards improving the FTSU Index score by continuing to promote the role of the FTSU Guardian and embed a positive culture of speaking up across the trust.
- To develop a FTSU Improvement Strategy aligned to a gap analysis against recommendations from the National Guardians Office.
- To arrange a FTSU meeting for Ambassadors to ensure that the ambassador role is embedded within services.
- To target the staff networks and ensure that all staff members and groups can access FTSU when requiring the service.
- Strengthen the support for the Guardian and Ambassadors including access to peer support, counselling and professional development.
- To develop case studies and continue to report on themes and trends from cases.

7. Recommendation

The Council of Governors is asked to receive this report.

Joy Fuller
Freedom to Speak Up Guardian
January 2020