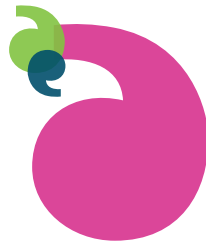


Patient Led Assessment of the Care Environment 2014
(PLACE)



Healthwatch Hertfordshire's experience of participating
in PLACE with 5 NHS Trusts and their Recommendations
for 2015

● About PLACE

Patient-Led Assessments of the Care Environment are a self-assessment of a range of non-clinical services which contribute to the environment in hospitals, hospices and independent organisations providing NHS-funded care in England.

The assessments look at cleanliness, the condition of the buildings, how well the buildings meets the needs of those who use it e.g. signage, car parking, the availability and quality of food and drink and how well privacy and dignity is supported by the environment.

This type of assessment was introduced in April 2013 and it is carried out annually. The aim is to focus on what patients say matter and they are undertaken by a combination (at least 50% of the team) of patients, the public and other bodies with an interest in healthcare such as Healthwatch in partnership with the NHS Trust staff using a range of criteria to identify how well the trust is performing and identifying areas for improvement.

Visits generally start at the beginning of March and end at the end of May with NHS Trusts being given a time frame as to when a site visit must be completed by. Results from these audits are logged onto a national database which is then analysed and fed back to the Trusts and the public (see HSIC - Health and Social Care Information Centre¹)

Guidance on how to conduct PLACE assessments and how to involve and train patient assessors is available but it is up to the individual Trusts as to how they use it.

Healthwatch Hertfordshire was involved from the beginning of PLACE and has continued support PLACE in 2014.

● Healthwatch Hertfordshire's Role in PLACE in 2014

Healthwatch Hertfordshire (HWH) has supported the following 5 NHS Trusts with their PLACE visits which started in March 2014 and finished at the end of May 2014:

- Hertfordshire Community NHS Trust (HCT)
- Hertfordshire Partnership University NHS Foundation Trust (HPFT)
- East and North Hertfordshire NHS Trust (ENHT)
- West Hertfordshire Hospitals NHS Trust (WHHT)
- Barnet and Chase Farm Hospitals NHS Trust (BCFH)

¹ <http://www.hscic.gov.uk/searchcatalogue?productid=15336&q=title%3a%22Patient-Led+Assessments+of+the+Care+Environment%22&sort=Most+recent&size=10&page=1#top>

HCT and HPFT have multiple sites where they deliver care and are undertaking PLACE visits constantly during the 3 month period whereas the acute trusts (ENHT, WHHT, BCFH) may only have 2 or 3 assessments in the same time frame.

HwH also facilitated PLACE training for Hertfordshire Community Trust at its Welwyn Garden City offices.

The aim for HwH has been to have at least one HwH representative on the visits acting as an independent observer utilising our trained Enter and View representatives as much as possible. Visits which are to mental health units are more sensitive and require less volunteers per visit due to their size compared to an acute hospital Trust. Mental health site visits benefit from having assessors with experience or an understanding of mental health. There were a total of 30 visits where at least one HwH representative was present.

In July 2014 HwH held a PLACE review meeting which was an opportunity to hear from and share the experiences that HwH representatives had had when carrying out the PLACE audits. Representatives who could not attend gave written feedback. The intention of this report is to share good practice with the individual Trusts and to try and create a consistent approach to PLACE across the County and improve the experience for the patient led assessors.

● FEEDBACK from HwH Representatives

The focus is now on giving the public a greater role in these audits. Is this how it feels for the public assessors?

Our review looked at 3 areas:

- The pre visit planning and training
- The visit itself
- Post visit

Hertfordshire Partnership University Foundation NHS Trust

Preparation and organisation of PLACE visits by HPFT is very good. There were a number of meetings prior to the start of PLACE 2014 to review how the 2013 process had gone and to engage fully with HwH for the 2014 programme. Despite having to change the HPFT lead for operational needs at the start of the visits, there was no negative impact on the how PLACE was carried forward. There is a real effort by HPFT to involve a wide cross section of the public and to be as transparent as possible. Training was provided by the Trust for interested people.

Comments from HwH representatives included: 'Organisation was to the point and covers everything.' 'HPFT always sent detailed reports for comments. Collaboration with all those present. Amended and came back with further comments.'

One monitor got a parking ticket whilst carrying out a PLACE visit and that was sorted out immediately.

Representatives noted that repairs and comments from the previous year had been addressed and felt that everything had been clearly thought through at Board level with an agreed action plan.

Representatives taking part felt valued and that what they were doing was making a difference. The public and staff assessors felt like they were on the same side.

Good Practice:

Comment from a HwH representative:

Lead officer (HPFT) introduced them (assessors) to the unit lead and asked them to say something about the unit, dos and don'ts, HPFT introduction: 'I am the Trust officer and this is what I would like my team to do'. Spelled it out and put any concerns at rest in this way. Everyone was introduced - broke down barriers and set up a good rapport - they were interested in what they were seeing.

Assessors seemed to be carefully selected and the day carefully planned which was done in a way to make the least disturbance to the patients. HPFT was also clear that patient assessors who belonged to a number of organisations made it apparent who they were representing on the visit.

Overall it was felt that the PLACE assessments are taken very seriously (there were places where assessors couldn't find anything to criticise). The food experience was efficient despite the food contractor changing at the beginning of the PLACE process.

Good Practice:

Travel costs were always covered by the Trust.

Improvements for 2015:

1. A pen picture of each unit with any restrictions given to the HwH office to enable representatives to know what to expect and whether they are eligible for some of the more secure units.
2. Directions and car parking information for each unit would also be helpful.
3. HwH would value a PLACE training session for HwH's Mental Health and Learning Disability Service watch Group to increase the number of eligible HwH assessors.

Hertfordshire Community NHS Trust

Similar to HPFT, HCT ensured that it met with HwH prior to the 2014 programme starting so that everyone understood what was expected as they also have multiple units to assess. There was good organisation for visits and HwH felt that HCT executed the PLACE assessments to a high standard. A Healthwatch representative was on nearly every visit though on some visits there were only Healthwatch representatives. Everyone was well supported and made to feel welcome.

It was felt that sometimes too much time was spent on tasting food but by the time of the Langley House visit this had improved. (Comments had been taken on board).

Good Practice:

The HCT lead fed back the results of PLACE to the HwH team prior to publication and had also carried out some research on what the experience had been like for the HCT staff.

Good Practice:

Travel costs were always covered by the Trust.

Improvements for 2015:

1. A pen picture of each unit with any restrictions given to the HwH office to enable representatives to know what to expect.
2. Directions and car parking information for each unit would also be helpful.
3. HCT to ensure a good mix of patient representatives and not just rely on HwH e.g. carer representatives that may provide a more direct view.

East and North Hertfordshire NHS Trust

Lister, Stevenage

When asked by ENHT to support PLACE at the Trust, HwH put forward a number of representatives and volunteers but not everyone was accepted as ENHT has a good pool of volunteers already engaged with the Trust. HwH therefore needs to make ENHT aware of who it expects to represent HwH on the different teams for next year.

Some areas of the hospital were a building site at the time of the visit and the way it was organised meant that there was a lot of walking backwards and forwards for briefings and refreshments etc. This was very tiring for some of the volunteers and perhaps could have been avoided.

The external porta cabin for the first meeting was not accessible by one of the HwH representative's wheelchair. This should have been considered, however the organisers immediately found somewhere else. Organisers need to be aware of patient assessors' needs.

Otherwise HwH felt the visits were well organised and impartial. However HwH representatives were on the same groups and could have been split more equally amongst the teams.

Good Practice:

Preparation was good for training and the Trust made sure that everyone had participated.

Staff seemed better informed about the PLACE process.

Expenses were paid on the day and instructions to get to the hospital and car parking was good.

One representative commented that they had to visit someone soon after in the ward that they had done the Place visit and was impressed that already some of the issues identified had been addressed.

Mount Vernon, Northwood - Cancer Services

No HwH rep was available. This assessment was scheduled on the same day as another Trust PLACE visit. Mount Vernon is out of county, more difficult to get to and parking is very expensive. It is a substantial amount of money to pay upfront.

QE11, Welwyn Garden City

No PLACE visits. Exempt due to building work.

Improvements for 2015:

1. Meet with HwH prior to the start of PLACE 2015. HwH to make clear who is representing HwH.
2. Assessor meeting areas to be better sited to avoid long walks and to meet the needs of the assessors.
3. Encourage more people to go to Mount Vernon e.g. by providing transport or parking permits.

West Hertfordshire Hospitals NHS Trust (WHHT)

St Albans City Hospital

Unlike the other Hertfordshire Trusts, HwH was not involved with WHHT's PLACE in 2013 but was keen to be involved for 2014. There was no pre-meeting and all communication was by email.

HwH asked for clarification on the following:

- Do you require only experienced PLACE assessors or will you be offering some kind of training/briefing session for those who have never done PLACE before.
- How many volunteers would you like for St Albans City Hospital?
- What are the timings for the St Albans visit

The visit to St Albans was advised in good time but though a date for the Watford site was not available the Trust wanted potential volunteers for that visit as well. Names were submitted for both sites at this time.

During the assessment, it was felt by HwH representatives that staff had been a little over bearing (taking too much part in the meeting) and appeared to listen to private conversations. Assessors were not left alone to discuss opinions. Not everyone appeared to have had training, just 10 minutes of introduction with no previous experience of PLACE. It felt to the HwH representatives that WHHT was short of volunteers before the visit and chose anyone rather than used a balanced approach.

The assessment seemed to be running late - was there too much to do on the one day? The Lead nurse had to go back to Watford at 3pm.

Reports were signed on the understanding that the report would be shared first before uploading to the national database (see HPFT) but this was slow in being sent.

No expenses were paid.

Watford General Hospital

Communication was inconsistent with the HwH office so that the date of the Watford visit was not communicated to the HwH office directly. Several HwH representatives had been previously put forward to the organising team (Facilities) together with HwH members who wanted to be involved. HwH needs to make the Trust aware of the difference between representatives (who have a responsibility to HwH) and members who do not and who should be viewed as members of the public to avoid any misunderstanding.

Again training was inconsistent with some members of the public appearing not to understand the process. There appeared to be a second PLACE day for Watford Hospital (that was not communicated to HwH) that the Trust was trying to resource.

There was a huge amount of time spent tasting food (at least a third of the day). It is obviously important to get a view on the quality of food but it went beyond tasting and felt like a meal. It was felt that it was not necessary to taste every single meal offered in the 7 day period rather than just one day. Looking at how the food is served and how patients are supported is more important. Less time was available to be spent on wards it seemed.

Good Practice:

On two of the teams that included HwH representatives, for some areas that were identified during the PLACE assessment, the Trust lead felt that they should be dealt with immediately 'rather than wait for a report'.

Some of the WHHT staff did not seem to know the process well and found the reality of the assessment quite difficult. The HwH representative on this team felt pressured as she felt she was the only one who knew how the system should work.

No expenses were offered. Representatives had to be proactive asking if they would be needed on the day and if they could get a car parking permit (which was given).

Hemel Hempstead Hospital

Exempt for WHHT but St Peters ward at Hemel Hempstead run by HCT was assessed for PLACE.

Improvements for 2015:

1. Meet with HwH prior to the start of PLACE 2015. HwH to make clear who is representing HwH and what it can provide.
2. Improved communication between HwH and WHHT. HwH has a valued and well-developed relationship with senior staff and clinical leads at WHHT but is perhaps less known by the Facilities team. There needs to be clarity of expectation of what the Trust wants and is able to provide for volunteers.
3. A coordinated approach to training staff and volunteers.

Barnet and Chase Farm Hospitals NHS Trust

HwH was asked to participate in BCFH PLACE at very short notice.

Some staff did not appear to be trained. One HwH representative heard the staff member say 'they were there to look at the care given to the patients' which is incorrect. This particular team lead seemed to not want assessors to look at things like dust, cracked paintwork etc. The organisation of this particular team was so poor that the HwH representative decided to take no further part in the assessment as she did not want HwH to be associated with the results.

BCFH refused to pay expenses (though car parking was covered) even though they had indicated they would by email to the HwH office.

One of the PLACE days was the same day as Watford Hospital.

The Royal Free has now taken over BCFH and it is hoped that there will be an improvement for next year.

Improvements for 2015:

1. Meet with HwH and Healthwatch Barnet prior to the start of PLACE 2015 to discuss an agreed way forward.
2. Ensure staff fully understand the PLACE aims and provide training for new patient assessors.

● Conclusion

Comparing hospital Trusts nationally and even locally does not necessarily reflect a true picture as each Trust does things a little differently and like is not being compared with like. It is perhaps better to listen to what the local participants say about the independence of the visits and to communicate with the public on what improvements are being made as a result of the assessments.

It is not evident that there is a consistent approach by all trusts nationally as to the makeup of the groups of assessors undertaking PLACE assessments.

PLACE assessments probably need to be refined somewhat and reduced because there is too much for Trusts to do. It is better to do something well rather than try to cover everything, particular in Trusts with diverse interests. The process needs to be more succinct and targeted looking at detail for a small area rather than covering everything. It can be overwhelming for volunteers and Trusts have a huge amount of information to go through in order to make the most of the data.

Staff don't always understand what PLACE is about and that these are 'patient representatives' looking at the environment from a patient perspective and they do not need to understand the clinical/operational process, which may not actually be working. Staff can represent the 'process' side.

The percentage figure produced for the PLACE visit often does not really reflect all the work that has been done by the Trust and the volunteers. However given the limitations of the system, patients and Trusts can gain much from PLACE assessments by working together as a team to effect change that will improve the patient and staff experience.

● Recommendations

Assessor Teams	<p>Trusts need to demonstrate that their assessment 'teams' are a random selection of the public, patients, carers and interested organisations and where possible ensure that they include a HwH representative.</p> <p>A recruitment and publicity strategy for PLACE is important for each Trust to develop to meet its own needs. For example HwH was contacted by the Royal National Institute for Blind People about how their members could get involved with</p>
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	<p>PLACE assessments in the future. How would each Trust respond to this request?</p>
Training	<p>In some instances it was felt that those on the assessment did not have an understanding about what they were doing or lacked confidence and this made it difficult to ensure a robust audit. This applied to both members of the public and in some cases to the staff.</p> <p>New patient assessors and staff leads need to have had some kind of awareness training or information session. A pre -visit briefing incorporating the local aspects of the unit being assessed is a good way to get a team to start working together.</p> <p>A clear approach to training needs to be thought through by each Trust before PLACE starts.</p>
Timing	<p>We appreciate that there may be a short window to carry out a visit once it has been advised but it would be good to avoid having visits at the same time as other Trusts as this will reduce the pool of volunteers. HwH is happy to act as a point of contact to check when other Trusts have organised visits.</p>
Organisation	<p>HPFT and HCT already have a well thought out engagement process with HwH as they have a complex and lengthy programme to deliver.</p> <p>For acute trusts PLACE assessments can be an intensive and resource heavy time so it is important that planning starts early and that includes meeting with HwH. We recommend that WHHT, ENHT and BCFH meets with the key HwH Board member and officer before the start of PLACE 2015 to agree an action plan that can be implemented as soon as their site assessments have been notified.</p> <p>As Princess Alexandra Hospital in Harlow receives a large percentage of the Hertfordshire population, HwH intends to approach PAH to see if it can be involved with their PLACE in 2015.</p>

Feedback	A formal 2 way feedback session with HwH helps to improve the process and makes volunteers feel valued.
Travel expenses	<p>Clarity on paying travel expenses is essential. Good practice would suggest that volunteers be reimbursed for travel costs and especially for car parking. It needs to be made clear from the outset what the Trust's policy is regarding reimbursement of expenses.</p> <p>What worked well was where Trusts gave a token or pass to cover the cost of car parking so that the assessor did not have to worry about finding money up front.</p>
HwH	<p>HwH also needs to ensure that staff organising Trust assessments understand the difference between a volunteer who is representing HwH and volunteers that are members of Healthwatch who are offering to support the process.</p> <p>HwH will brief its representatives and will ask for feedback on how the visit was organised and carried out and report back to the Trusts.</p>

Responses from the NHS Trusts:

Hertfordshire Partnership University Foundation NHS Trust

Hertfordshire Partnership University NHS Foundation Trust (HPFT) have a good working relationship with Healthwatch Hertfordshire, particularly around the PLACE audits that are carried out annually within our Trust.

Healthwatch offer professional reliable people from a variety of backgrounds that not only work with the Trust but are not afraid to challenge or advise which we find extremely useful and ensures we maintain the quality of our services year on year.

We look forward to working with them again in 2015.

Hertfordshire Community NHS Trust

Hertfordshire Community NHS Trust welcomes Healthwatch Hertfordshire's report following the 2014 PLACE programme, and the recommendations contained within it. This has helped to guide us in planning for 2015; particularly the suggestion of carer representation in the assessments teams. As a result we have invited Carers in Hertfordshire to work with us on the 2015 PLACE programme which we feel will add a different perspective and viewpoint to our assessments and subsequent learning.

We look forward to again working closely with Healthwatch Hertfordshire on the forthcoming 2015 PLACE programme, and we appreciate their continued support to help us identify what we do well, and what we can do to improve the experiences of our patients, their relatives and carers who use our services.

East and North Hertfordshire NHS Trust

The Trust would like to thank HwH for sharing this insight into PLACE from the volunteers' point of view and giving the opportunity to reply.

Selection of Volunteers

- The PLACE process is a joint project primarily involving the Trust Facilities Department and the ENHT Membership team, although other staff groups are involved.
- The number of volunteers requested is based upon the number of areas needing to be covered, the aspects of those areas to be covered and balancing the number of volunteers with the number of staff assessors, as suggested in the PLACE standard. Our ideal approach is to have an equal number of staff and volunteers in each team so that each volunteer has a staff "buddy". Each team has an assigned "scribe" who is there purely to make notes on behalf of the assessing team and ensure that all areas of the assessment are covered. The "scribe" does not participate and has no influence on the team's decisions.
- Previous selection has been based on a first come first serve basis of responses once the request goes out to volunteers. It is believed this is the fairest selection method, without showing favour to any particular group.

Volunteer Briefing

- ENHT holds an annual assessor briefing aimed at informing volunteers about the PLACE process and how the assessment works on the day and to enable prospective volunteers to meet the Trust PLACE team along with fellow volunteers.
- Some volunteers choose not to attend this briefing as they may have been trained elsewhere, as is their right, however this is the opportunity to meet other assessors and find out about ENHT's approach to PLACE.

- This year's PLACE Briefing will be held on Wednesday 11th March 10am to 12.00, volunteers have already filled all available spaces on this briefing.

Feedback on 2014 PLACE Assessment Day

- As stated in the HwH feedback report, Lister Hospital site was undergoing a major reconfiguration with a great deal of building work on site. The choice of room for the briefing was not ideal and unfortunately one of our volunteers was not able to access the portacabin used. There was no intention to disadvantage any volunteer, however, owing to the reconfiguration, space at the time was very limited. Volunteers had the opportunity to obtain refreshments at the coffee shops in the main building; each of the scribes had vouchers to ensure volunteers did not need to return to the portacabin until the end of the assessment process. Comments about the amount of walking involved have been taken on board in the planning of 2015 PLACE process.
- The volunteers were offered the opportunity to make their own team selections and on the day this was declined.
- The Trust membership team has received requests to be involved from patient representatives with special needs, and every effort has been made to enable those individuals to join in with the assessment process.
- Each Trust receives six weeks' notice of the week in which its PLACE assessment should take place. This notice period means that the scheduling may conflict with another local Trust as the Mount Vernon Cancer Centre assessment appears to have done in 2014.
- MVCC is based on premises owned by another Trust and so parking costs are not within the control of ENHT. The comments regarding parking and access to MVCC have been duly noted and will be investigated.

Awaiting response from West Hertfordshire Hospitals NHS Trust

Royal Free London NHS Foundation Trust (Barnet and Chase Farm Hospitals)

The 2014 PLACE audit was undertaken when the Barnet site was part of Barnet and Chase Farm Hospitals NHS Trust and not part of the Royal Free London NHS Foundation Trust. That transaction took place on 1st July 2014.

We weren't made aware of the issues raised on the Barnet site until you shared those events with ourselves. Indeed, we are most disappointed that these events happened and I would like to reassure you that since the enlarged trust came into being we have worked hard to ensure that the PLACE process is undertaken in a consistent manner and that our patient reps fully understand the process they are participating

in. Since PLACE 2014 the trust facilities, nursing, estates and infection control teams on all three of our hospital sites have undertaken “mock” PLACE assessments, complete with external assessors to ensure that we undertake such audits throughout the year and not just as an annual snapshot.

We are busy planning our 2015 PLACE agenda and awaiting the schedule of audit dates from the HSCIC. We are confident that the 2015 rounds will be conducted appropriately and would be keen to ensure that any external assessor who took part last year and was concerned over the conduct of proceeding would be happy to re-engage and undertake such audits on any of our three hospital sites that we are responsible for.