



Care at Home in Thanet and Canterbury Healthwatch Kent Report 2014

Healthwatch Kent and Kent Community Health Foundation Trust (KCHFT) have worked together in partnership to gather experiences from patients who are currently receiving nursing care at home.

Healthwatch Kent contacted patients via a variety of methods to gain independent feedback from people who are receiving nursing care from KCHFT.

About Healthwatch Kent

Healthwatch gives people a powerful voice locally and nationally. In Kent, Healthwatch works to help people get the best out of their local health and social care services. Whether it's improving them today or helping to shape them for tomorrow. Healthwatch Kent is all about local voices being able to influence the delivery and design of local services. Not just people who use them, but anyone who might need to in future

Acknowledgements

Healthwatch Kent would like to thank all the Kent Community Health Foundation Trust staff that helped hand out information packs to their patients and to the patients, their friends and family for taking the time to give their feedback about the services they receive at home from Kent Community Health Foundation Trust.

Disclaimer

Please note that this report only relates to feedback received as a result of this project. Our report is a snapshot of experiences that was observed and contributed at the time.

Purpose of the visits

This project was planned to allow an independent organisation to gather feedback from patients, carers and families receiving nursing care at home. Kent Community Health Foundation Trust collects patient feedback on a regular basis which is predominantly very positive about their care at home service. It was felt that an independent method of collecting and reviewing feedback would be a valuable tool to support existing patient feedback and data. It is intended that the project will also highlight examples of good practises which can be shared with other parts of the county.



Methodology

The Health and Social Care Act allows Healthwatch Kent's trained authorised representatives to observe services and talk to service users, patients, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies. In order to reach people who are receiving services in their homes, Healthwatch Kent developed a methodology to contact people receiving care at home and offer them the option of an authorised visitor coming to see them at home to find out what they think of the services they are receiving.

Healthwatch Kent designed bespoke materials and methods for people using KCHFT's services to make a comment or get in touch with Healthwatch.

- An 'easy read' flyer explained that the project was looking to hear people's experiences and outlined the ways people could get involved. Patients were offered the chance to give feedback by a written form, a telephone interview, by email or through a face to face visit at home.
- A 'Speak Out' Form, allowed people to make a written comment or raise an issue and send it by Freepost to Healthwatch Kent. The Speak Out forms for this project were identifiable as they all had the X corner cut off.
- A questionnaire that guided telephone conversations conducted by Healthwatch staff and volunteers

Consideration was given to the design of these materials, to avoid the use of scales and an over reliance on quantitative information, instead maximising the opportunity to allow patients to 'tell their story' and hence gain a richer set of experiential data that allowed a review of themes. All materials were designed in agreement with Kent Community Health Foundation Trust.

Nursing teams in Thanet & Canterbury were provided with sealed envelopes to distribute to their patients. 300 patient packs were distributed by KCHFT staff. Staff were provided with a brief and encouraged to make patients aware of the content of the envelope and that the opportunity to share feedback about KCHFT's services would be anonymous, so the Trust would not be able to identify individual feedback.

In the envelope was a letter from Healthwatch Kent explaining who they are and patients were invited to share their experiences in a number of ways;



Tell us your
experiences of
your **nursing care**

 **By Telephone:**
Healthwatch Kent
0808 801 01 02

 **By Email:**
Info@healthwatchkent.co.uk

 **Online:**
www.healthwatchkent.co.uk

 **By Post:** Write to us or fill in and send a
Speak out form. **Freepost RTLG-UBZB-JUZA**
Healthwatch Kent, Seabrooke House,
Church Rd, Ashford TN23 1RD

 **Face to Face:**
Call 0808 801 01 02 to arrange a visit

healthwatch
Kent

- Email info@healthwatchkent.co.uk and send in their experiences
- Share experiences on the phone by calling us for FREE on 0808 801 0102 and talking to Healthwatch Kent.
- Complete an enclosed 'Speak Out' form. A self addressed envelope was enclosed so people could return to one of the nursing team or put in the post box for free.
- Request a visit from Healthwatch Kent to talk to you at home face to face. A telephone number to call was identified to organise a visit.

All our observations have been shared with KCHFT whose response is included in this final report.

Response rate

A total of 25 responses were received from the 300 patients packs that were distributed, this equates an 8% response rate, i.e 1 in 12 patients responded.

- 15 people returned a Speak out Form
- 7 people called to talk to someone and complete a more detailed questionnaire. Of these callers, one person had seen the survey advertised on the Healthwatch website and although no longer using the service they wanted to share a past experience. They identified that they had raised a complaint with KCHFT which had been resolved in January 2013. Another person who called the telephone line was a care home manager who had received a pack from a visiting nurse.
- 2 people requested an authorised visitor from Healthwatch Kent visit them at home to complete the questionnaire as they had complex stories they wished to tell.
- 1 person from a target postcode called the Healthwatch Kent telephone line to explore how to make a complaint about KCHFT.



They had not heard of the survey and were encouraged to complete a questionnaire over the phone.

Profile of Respondents

Of the 25 responses, 12 were female, 10 were male and 3 were unknown. It is hard to draw any inferences from the data in terms of age, or length of time using the care at home service as many respondents did not answer these questions.

		Unknown	Male	Female
Patients		2	10	7
Care home manager		1	0	0
Carer		0	0	5
Total respondents		3	10	12
Age	Under 60	0	0	1
	61yrs-70yrs	0	1	1
	71yrs-80yrs	0	0	2
	80yrs +	1	1	1
	Unknown	2	8	7
How long receiving care at home	Less than 4 weeks	0	1	0
	1-2 mths	0	0	0
	3-6mths	0	0	0
	6-12mths	0	1	0
	over 1 year	1	2	7
	unknown	2	6	5

Table 1 Profile of respondents

The greatest number of responses (40%) came from people living in the CT9 postcode area, covering Birchington, Cliftonville and Margate.

A further 20% of responses came from CT12, covering Northwood, Minster-in-Thalet, Cliffsend, Monkton and Manston.

Postcode		No. of responses
CT9	Birchington, Cliftonville and Margate	10
CT12	Northwood, Minster-in-Thalet, Cliffsend, Monkton and Manston.	5
CT11	Ramsgate	3
CT7	Birchington-on-Sea, St Nicholas-at-Wade, Sarre, Acol	2
CT10	Broadstairs, St Peters	2
CT6	Herne Bay, Herne, Broomfield, Greenhill, Eddington, Beltinge, Reculver	1
ME13	Faversham, Boughton under Blean, Selling	1
unknown	Unknown Thanet area postcode	1

Table 2 Postcode areas of respondents



Findings

Type of care being provided at home

The respondents surveyed were receiving a range of services at home, including;

- injections and syringe driver management,
- having dressings changed and management of ulcerated legs,
- catheter changing,
- and respiratory and cardiac monitoring

4 people indicated that they are seen more than twice a day, *'I have nursing care and care workers to help with getting up in the morning and dressing and undressing and going to bed'* and that *'nurses will also come to see me again if I request it on the same day'*.

The majority of respondents are seen daily, with only one person saying they see a nurse every 6 months. One person said *'I hope it will soon increase to three times a week as I have had to visit A&E as my other leg is now infected'*

Process of getting a care at home package

The experience of requesting and getting a care at home package seems to be equally split with some finding it *'easy'* and others finding it *'very difficult'*.

'It was all arranged for me after my husband passed away'

'It was easy, all the staff were very good throughout the whole process'

'Easy I had private treatment at QEQM for breathing problems, the private consultant arranged everything and the nurse now visits on the NHS'

'The package was in place on discharge from hospital'

'It was not easy, they were reluctant to transfer changing my dressing from the GP practice nurse to the community team, despite difficulties in my getting to the surgery'.

'I had difficulties in getting care details from the hospital discharge sheet transferred to the buff care sheet used by the community services'

It was complicated; he was transferred from a London hospital... it raised issues of continuity of treatment and safety. The criteria for discharge from one service to transfer to another was not clear'

One person suggested that the process has recently changed and that *'up to 5-6 weeks ago it was very easy, now it's very difficult as the requesting system has changed'*.

Appointments and relationships with care at home staff

The majority of people reported that they do not have a choice about what day and time their care is provided at home with only two people saying that they did have a choice, albeit *'by being assertive'*.



However, there was a mixed response when asked if the appointment times were convenient. About half of respondents indicated that the appointment times were convenient.

'They have never let me down over 3-4 years and they always keep to their times' and another saying 'they come between 3pm- 5pm every day'.

But other responses indicated some concerns regarding appointment times not being kept, comments made included;

'The timeslots are too broad and there is no contact if they are running late'

'Sometimes they do not come in the morning as they are supposed to and they don't let me know'

'An improvement - they are coming on time to change my dressing as it is important to me to start my day early'.

The majority (80%) know how to change an appointment time if it's not convenient, but said *'it's difficult'*.

Only one person reported seeing the same person who provided their care each time. The majority of people did not find any difficulties seeing different members of the team each time as *'they are a small team, so have got to know the whole team'*.

People indicated that they had developed relationships with the community nursing staff that visited them, with some staff being mentioned by name and praised *'... she is worth her weight in gold, full of good advice and helpfulness.'*

However, one respondent had found that *'continuity of care through the notes is not good... the notes are often too bland... and not a good record of the changes made'*. The same person also explained that different nurses had different abilities which impacted on her husbands care *'not every nurse applies the bandages correctly'*.

Information and communication

The majority (90%) of those that completed the fuller questionnaire stated that they felt the information they had been given was very, or quite clear and easy to understand.

60% felt that the staff had given them their full attention, comments included;

'I am satisfied with the way my care has been handled'

'I have received wonderful treatment; they (nurses) have been cheerful, helpful and caring'

'The nurses are very good and I appreciate all they do for me'

'The nurses have been excellent'

'First class service for regular Injections'

'Very happy with the treatment I have received, they have resolved all my problems'

'I can't praise her (the nurse) enough'

'The nursing team were wonderful'

'Very happy with nurses' support'

'Their nursing skills are first class'

However one person's comment highlighted that the experience of the service can be variable stating *'two of them are very good'*. Some other negative comments focused on the level of clarity and understanding that patients had about the next steps in their planned care. This was the question that had the lowest response rate with only 70% of people completing it and of these 40% stated that they were not sure what is happening next;

'They have referred me to tissue viability, but not sure what is happening'
'Not sure what is happening with regards to ... surgery'

Privacy and decision making

People were asked if they felt their privacy had been respected and 80% responded positively some people said, *'They always show me respect and consideration and are always very polite and happy'* and *'the nurses are very caring and put me at my ease'*.

All respondents felt that they had been involved in decisions about their care and one person said they were *'involved in decisions about his (husbands) care at every stage, staff were excellent up to, including and after his death.'*

Suggested improvements

When asked if there was anything that people thought could improve the experience of having Nursing Care at Home, the responses clustered into themes;

Those who were delighted with the service

'They provide a brilliant service and cannot do enough to help. Staff are always helpful and considerate'

'Marvellous'

'No, I could not ask for better care'

'They show a great pride their work; I cannot fault them at all'

'Special mention to X, for her caring attitude, her attention to detail, her above and beyond call of duty and happy disposition'

Those who felt aspects of co-ordination and communication could be improved

'I don't like it if it's going to be in the afternoon and the nurses have not come.'

'The nurses do not look at notes before coming'

'They don't ask him how he is'

'To improve the quality of care notes and the use made of them'

Those who raised issues about the current service

'Need to ensure that individual nursing skills match the patients care needs'

'Some are in a hurry and some are perfectionists. Some could be a little more friendly, more staff would help'.

'Making sure that clinical waste is always removed by the nurses'

One person raised an issue about waiting for some equipment to be replaced and a second issue of waiting for over a week to have a dressing changed.



Whilst talking to this person, Healthwatch Kent provided information to enable them to raise their concerns, or make a complaint, with Kent Community Health Foundation Trust directly should they wish.

Those who's concerns were about other aspects of their care

'Only concern I have is the problem of getting an appointment with the GP, once you get an appointment the GP is actually very good'

'Improved coordination of care from one service to another, perhaps with a designated coordinator'

'More holistic care'

Discussion of findings

Whilst the feedback overall was positive, there are some interesting comments made by respondents that provide deeper insights as to how the care at home service is experienced. Every response included personal comments to support the responses and interpreting these looking at the strength of language and how strongly the patient feels adds richness to the data beyond numerical analysis.

Many of the negative comments made, were phrased in a gentle manner the negativity being in what was not said;

'little more friendly',

'two of them are very good'

'too bland'

'not every nurse applies the bandages correctly'

Most people do not like to give direct criticism, so we expected to see greater levels of negativity in the Speak Out Forms which can be completed and sent in by post without speaking to anyone directly, but we found similar levels of positive and negative comments made in both the phone call questionnaires and the speak out forms.

There was a clear theme of patient gratitude and reliance on the service present in many of the responses, some examples being;

'I appreciate all they do for me'

'they have resolved all my problems'

'it is important to me'

The strength of importance the patient places upon the personal relationship is evident in the range of adjective and phrases used, *'brilliant', 'marvellous', 'beyond call of duty', 'excellent' and 'her weight in gold'*. A number of staff, and in fact a whole team, were named and asked if thanks could be passed on by a number of different people using the service.

Customer satisfaction surveys have an average response rate of 10-15%. The low response rate in this project may indicate a greater 'non-response' bias. This would suggest that those that did respond were more motivated to take the time to answer the survey and tends to contain a higher proportion of people who have had either very good, or at the other extreme, very bad experiences. Looking at the clusters of feedback at both

extremes and the anecdotal evidence of why people contacted Healthwatch either by phone or requested a home visit, this seems a plausible explanation.

However, it was noted that no responses were received from the Canterbury area and there are perhaps issues regarding the dissemination of the patient packs that reflects the low response rate.

In general, the feedback is about the people, the nurses and care workers and the levels of interaction and relationships that are reflected as so important in people experience of receiving care at home. People are experiencing the service as 'patient centred' and that reflects strong communication and involvement of the patients in decisions about their care.

