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Date	26.09.18	Agenda item	Q.9.18.17

# PATIENT LED ASSESSMENT OF THE CARE ENVIRONMENT (PLACE) ANNUAL REPORT 2018

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Purpose of the paper	Summary of the 2018 PLACE scores and recommendati	ons	
Key control	This paper is a key control for the strategic objective to provide outstanding		
	care for patients		
Action required	For approval		
Previously discussed at/	None		
informed by			
Previously approved at:	Committee/Group Date		
	None		

# **Key Options, Issues and Risks**

This report provides an analysis and evaluation of the 2018 Patient Led Assessments of the Care Environment (PLACE) carried out at Bradford Teaching Hospitals NHS Foundation Trust.

PLACE assessments are a voluntary self-assessment of the non-clinical services and environment, which contribute to healthcare delivered in both the NHS and Independent/Private Health sector in England. Whilst they are voluntary, the Care Quality Commission (CQC) uses the findings to form part of the intelligence used to monitor the performance of the Trust.

PLACE is about being open and honest, making a point-in-time assessment, against set criteria. Unannounced assessments for PLACE were carried out in both clinical and non-clinical areas of all Trust sites in May 2018. The inspections were undertaken by teams of public volunteers (Assessors) facilitated by Trust staff members (Facilitators). The assessments are not reflective of the whole Trust, but provide intelligence on our services and the potential for areas of improvement.

#### **Analysis**

The 2018 results have been analysed nationally, locally and compared to our local cohort of Acute Trusts. It is pleasing to note that across all of the assessed domains, Bradford Teaching Hospitals Foundation Trust have seen a positive trend against the 2017 scores. The most significant improvements have been seen in Dementia, Disability, Privacy, Dignity and Wellbeing and; Condition and Appearance.

Whilst there has been good progress with all domains in the PLACE assessment, it is noted that there are key areas where progress is compromised and in addition, we continue to perform below the national average and below the average scores reported locally.

In order to ensure that we continue to improve, a robust Action Plan is being developed by the Authors of this report to address areas where low performance scores have been obtained. This Action Plan will have a designated lead and dates for resolution. The Action Plan will be a working document, updated on a monthly basis to provide assurance that the outcomes are being achieved.

Further detailed analysis and commentary is included in the body of this report.

### Recommendation

The committee are asked to note that:

 A robust Action Plan is being developed in order to monitor all improvements that need to be made, this will be presented to the Executive Management Team and then monitored via the Patients First Committee.



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 To facilitate the completion of the actions investment is required from the Trust to make improvements in certain areas in order to optimum scores. In 2018/19 no capital funding has been allocated at this time.

Risk assessment						
Strategic Objective	Appetite (G)					
	Avoid	Minimal	Cautious	Open	Seek	Mature
To provide outstanding care for patients		g				
To deliver our financial plan and key performance targets			g			
To be in the top 20% of NHS employers			g			
To be a continually learning organisation				g		
To collaborate effectively with local and regional partners					g	
The level of risk against each objective should be indicated.	Low		Moderate	High	Signif	icant
Where more than one option is available the level of risk of each option against each element should be indicated by numbering each option and showing numbers in the boxes.	Risk (*)					
Explanation of variance from Board of Directors Agreed General risk appetite (G)	Whilst there has been good progress and improvement of scores in all domains of the PLACE assessments, there are key areas where progress is compromised. In addition, we continue to perform sub-optimally in comparison with other local Trusts.			nents, mised.		

Risk Implications (see section 4 for details)	Yes	No
Corporate Risk register and/or Board Assurance Framework Amendments	*	
Quality implications	*	
Resource implications	*	
Legal/regulatory implications	*	
Diversity and Inclusion implications	*	

Regulation, Legislation and Compliance relevance
NHS Improvement: (Risk assessment framework, quality governance framework, code of governance , annual reporting manual)
Care Quality Commission Domain: (Safe, caring, effective, responsive, well led drop
Care Quality Commission Fundamental Standard:
Other (please state):

Relevance to other Board of Director's Committee:					
Workforce	Quality	Finance & Performance	Partnerships	Major Projects	Other (please state)



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# 1 PURPOSE/ AIM

The aim of this report is to provide a high level evaluation of the 2018 Patient Led Assessments of the Care Environment (PLACE) scores for Bradford Teaching Hospitals NHS Foundation Trust, and provide recommended actions to further improve our scores.

#### 2 BACKGROUND/CONTEXT

Patient Led Assessments of the Care Environment (PLACE) is a voluntary self-assessment of the care environment, which contribute to health delivered in both the NHS and Independent/ Private Healthcare sector in England. PLACE aims to promote the principles established by the NHS Constitution, that focus on the areas that matters to patients, families and carers; committing to ensure that services are provided in a clean and safe environment that is fit for purpose. The findings and scores are used by the CQC to form part of their assessment of the services that we provide.

The areas assessed are categorised under the following Domains:

- Cleanliness.
- Food and Hydration.
- Privacy, Dignity and Wellbeing (how the environment supports the delivery of care with regards to the patient's privacy dignity and wellbeing).
- Condition, Appearance and Maintenance of healthcare premises.
- Dementia (whether the premises are equipped to meet the needs of people with dementia against a specified range of criteria).
- Disability (the extent to which premises are able to meet the needs of people with disability against a specified range of criteria).

Unannounced inspections were carried out at Bradford Royal Infirmary, St Luke's Hospital and the Community Hospital sites between May and June 2018. Assessments included wards, outpatient areas, Accident and Emergency Department (AED), communal and external areas.

The number of areas to be assessed is clearly defined in the guidance and on all sites; the assessments met or exceeded these requirements. The PLACE scores are weighted in a number of ways to take account of a range of variables (such as the size of the site defined by the number of beds).



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The guidance aims to make scoring consistent and as objective as possible, however there are subjective elements to the process which cannot be entirely eliminated (such as food tasting).

PLACE assessments are intended to provide motivation and direction for improvement by providing a clear message - directly from patients - about how our environments and the services we provide might be enhanced. Results are published to help drive improvements locally and nationally. The assessment focuses exclusively on the environment in which care is delivered and does not cover clinical care provision.

#### 3 PROPOSAL

In this section of the report, the PLACE data (collated and distributed by NHS Digital) has been scrutinised and developed into several informative charts.

Figure 1: BTHFT comparative scores 2017 - 2018.

Domain	2017 score	2018 score	% improvement
Cleanliness Score %	96%	97%	0.9%
Food and Hydration Score %	85%	85%	0.4%
Organisational Food Score %	89%	89%	0.4%
Ward Food Score %	84%	84%	0.1%
Privacy, Dignity and Wellbeing Score %	71%	76%	<b>1</b> 5.0%
Condition, Appearance and Maintenance			<b>1</b> 4.7%
Score %	85%	90%	_
Dementia Score %	63%	76%	13.0%
Disability Score %	67%	76%	8.7%

Figure 1

The above shows, at a glance; the scores obtained for each domain in both 2017 and 2018.

The committee will note the percentage difference column shows an improvement in all domains in 2018.

This demonstrates a fantastic result in terms of the enhancement work completed in our care environments and the ownership shown by wards and departments in maintaining our sites in good order.

The significant effort and commitment made by our staff in completing and contributing towards the 2017 Action Plan should be noted, which was devised following the disappointing 2017 results.



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A major contributor to the upward trend in the scores obtained was the commitment from the Trust to provide £200,000 of capital funding in 2017/18 to make improvements, particularly in relation to Dementia friendly environments and Disability access.



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Figure 2: Scores in comparison to Yorkshire and Humber Acute Trusts.

Domain	CALDERDALE AND HUDDERSFIELD NHS FOUNDATION TRUST	HARROGATE AND DISTRICT NHS FOUNDATION TRUST	HULL AND EAST YORKSHIRE HOSPITALS NHS TRUST	LEEDS TEACHING HOSPITALS NHS TRUST	MID YORKSHIRE HOSPITALS NHS TRUST	BRADFORD TEACHING HOSPITALS NHS FOUNDATION TRUST
Cleanliness Score %	99%	100%	99%	100%	98%	97%
Food and Hydration Score % Organisational Food	92%	89%	92%	95%	86%	85%
Score %	92%	88%	87%	93%	78%	89%
Ward Food Score %	93%	90%	93%	95%	88%	84%
Privacy, Dignity and Wellbeing Score %	88%	75%	86%	89%	72%	76%
Condition, Appearance and Maintenance Score %	95%	96%	95%	98%	95%	90%
Dementia Score %	79%	73%	79%	85%	67%	76%
Disability Score %	87%	88%	88%	88%	78%	76%

Figure 2

The above scores are a snapshot of how we compare with other local Trusts within the Yorkshire and Humber Region.

Having completed a preliminary review of the data, there are certain elements and components to the questionnaires where the Trust cannot promptly achieve a similar score as what was recorded by our neighbouring Trusts. For example, pay on exit car parking and payment by card. The weighting of some of the questions may also disadvantage the Trust.

It should be recognised that areas of both Bradford Royal Infirmary and St Lukes Hospital in particular have specific challenges, such as the age, design and original purpose of the buildings, which can limit the ability to meet specific criteria of the PLACE assessment in full or in part.

A full and detailed review of the precise scores obtained in the inspected departments is underway and will form an integral part of the PLACE Action Plan for 2018/19.



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Figure 3: National Average and BTHFT comparison 2017 - 2018.

Domain	2017 National Average	2017 BTHFT	2018 National Average	2018 BTHFT
Cleanliness Score %	98%	96%	99%	97%
Food and Hydration Score %	90%	85%	91%	85%
Organisational Food Score %	89%	89%	90%	89%
Ward Food Score %	91%	84%	92%	84%
Privacy, Dignity and Wellbeing Score %	94%	71%	86%	76%
Condition, Appearance and Maintenance Score %	85%	85%	95%	90%
Dementia Score %	76%	63%	81%	76%
Disability Score %	84%	67%	85%	76%

Figure 3

As previously stated, The Trust has improved performance in all domains in comparison to the 2017 scores. However, the Foundation Trust has performed worse as an average in all domains when compared to other organisations nationally for 2017 and 2018 (Figure 3).

Comparing the BTHFT scores, it is noted that despite being below national average we have made significant improvements towards meeting the national average in all domains.

It should be noted that national average scores are derived from all site types represented in the data, including small specialist services such as Hospices, Independent and Private sites delivering NHS services, Mental Health and Community providers, as well as Acute Trusts of all sizes.

# **Next Steps**

In order to ensure that we continue to improve our scores as a Trust, an Action Plan is being developed to address areas that have obtained low performance scores. The Action Plan will identify any areas of improvement from "quick-wins" with minimal or no cost through to areas which will require significant capital investment in order to align with our cohort of local Trusts.

This Action plan will be reviewed and approved by the PLACE Steering Group and each action will have a designated lead along with assigned start dates and completion dates. The



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Action Plan is a working document and will be updated regularly to provide assurance to the PLACE Steering Group that the outcomes are being achieved.

It is proposed that a bi-monthly report will be provided at the Patients First Committee (chaired by the Chief Nurse) and its content and progress noted. It is important that the Action Plan has ownership through all levels of the Trust and that its implementation is supported by all.

The Trust has been approached by NHS Improvement (NHSI) to take part in a significant review of PLACE. It is hoped that this may include measures to improve access to the process for disabled people and provide an opportunity to feedback nationally on our experience of using the measure in a hospital environment, and where we feel the questions restrict us as a Trust from providing an acceptable response.

#### 4 RISK ASSESSMENT

It is suggested that The Committee recommends that a full Risk Assessment of current performance is undertaken and is considered by the Integrated Governance and Risk Committee for consideration for inclusion on the corporate risk register in relation to:

- Capital Investment.
- Equality and Diversity In relation to disability or dementia domains.
- CQC regulation This is a key component of the intelligence used to monitor the Trust.

## 5 RECOMMENDATIONS

The Committee are asked to note that:

- A robust Action Plan is being developed in order to monitor all specific improvements that need to be made.
- A summary of all the Actions we are unable to achieve will be developed to ensure the committee are fully sighted of these areas.
- The committee are asked to endorse the suggestion that a full Risk Assessment is carried out.
- To facilitate the completion of the actions recommended, investment is required from the Trust to make improvements in certain areas in order to optimum scores. At the time of writing this paper, no capital funding has been allocated within the 2018-19 Capital Programme.



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# 6 APPENDICES

The National Report for Patient-Led Assessments of the Care Environment in England published on 18 August 2018 can be found here:

https://digital.nhs.uk/data-and-information/publications/statistical/patient-led-assessments-of-the-care-environment-place/2018---england

The link provides a summary, key facts and resources that can be used to provide in-depth scrutiny of the data for each and every care establishment in England that has participated in the PLACE Assessments in 2018.