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Appendix 3

Think Healthy Generic Workshops

One of Healthwatch Derby's aims is to ensure patients, carers, support organisations, and those who are the most vulnerable and do not always have the opportunity to voice their opinions – are brought together in a shared platform with health and social care decision makers at the highest levels. With this in mind, our consultation plan included the facility for two generic workshops. As we went out into the community to gain feedback about the consultation process, we took on board suggestions from support groups, and from service users – and this resulted in a third workshop bespoke for Asian service users. This section looks at both the specialist and the generic workshops.

Introduction

Healthwatch Derby worked very closely with the Trust to draw out a meaningful agenda for the two generic workshops. Our experience at engagement and networking, especially attendance at other mental health service forums such as the Trust's own 4Es, and the stakeholder engagement event at Belper organised by Hardwick CCG was taken into consideration.

The agenda for the generic workshops included presentations by the Healthwatch Derby Team, Safeguarding Team as well as a presentation by the Trust. The real 'meat' of the workshop lay in the group work session, followed by a Q&A facilitated by Healthwatch Derby.

To design the group session, we spoke to a number of different service users, support groups, and also had input from the clinical commissioning groups about the consultation. The Trust put together a team of senior officers who met with Healthwatch Derby consultation lead, Samragi Madden on a number of occasions to work out what would be a meaningful and richly informative group session plan. The final plan that was used for the generic workshops is highlighted in the next page.



Generic Workshop Group Session Plan

Attendees were divided into five groups during the group sessions. Each group had a session facilitator. Facilitator spoke to attendees about the group theme, and also had a list of talking points to help the group session.

Facilitator's role was NOT to influence the session in any way. They asked attendees about their experiences and views, and made a note of what was said. Themes emerging from each group session were used as part of the panel discussion and Q&A part of the workshop. Trust colleagues were welcome to attend each group, and to take part in the group discussions.



(Healthwatch Derby presentation, Radbourne Workshop, 15th September 2014)



(Trust colleagues, Radbourne Workshop, 15th September 2014)

An outline of the five groups, and talking points is listed below. These were discussed with and approved by Trust colleagues on the 20th August 2014.

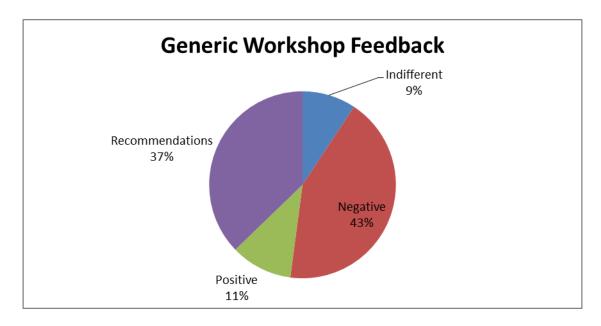
| ACCESS | INFORMATION | DIGNITY | ENVIRONMENT | IMPROVEMENTS |
|-----------------|--------------------|-----------------|-------------------------------|-------------------|
| Are you able | Do you know | Are services | Are DHFCT | Do you think |
| to access | what services | empathetic, | venues fit for | DHFCT services |
| services easily | are available | compassionate | purpose, do | are adequate to |
| and in a timely | for your | and flexible to | you like | your needs? |
| manner? | needs? | your needs? | coming to | |
| | | | DHFCT | |
| | | | venues? | |
| What are the | Have you | If you are not | How safe do | What |
| barriers to | received | happy with the | you feel (as a | improvements |
| accessing | enough | service, do you | patient, carer, | would you like to |
| services? | information | know how to | staff member, | see? |
| | and support if | raise | family of | |
| | you have given any | concerns? | service user) coming to or | |
| | feedback? | | being at | |
| | reeuback : | | DHFCT | |
| | | | venues? | |
| Do you know | Do you get | Do you feel | Are DHFCT | Do you feel you |
| how to contact | enough | valued and | venues open, | have a say in the |
| DHFCT and | information | listened to? | approachable | way DHFCT |
| who to | about your | | and friendly? | structures its |
| contact? | condition, | | | services? |
| | support | | | |
| | groups and | | | |
| | resources | | | |
| | available? | | | |
| Any patient | Any patient | Any patient | Any patient | Any patient |
| experience | experience | experience | experience | experience |
| stories around | stories around | stories around | stories around | stories around |
| the theme of | the theme of | the theme of | the theme of | the theme of |
| access? | information? | dignity? | environment? | improvements? |

A quick look at the attendance numbers and feedback received for each generic workshop reveals we were able to get a good turnout, and rich data:

| Workshop | Number of Attendees | Feedback received |
|-----------|---------------------|--------------------|
| Radbourne | 50 | Total 215 items of |
| Kingsway | 61 | feedback |

Generic Workshop Observations

Those who attended the workshops gave us feedback in large numbers, and the majority of those who spoke to us said they enjoyed the workshops, and looked forward to more such open forum participatory events. An analysis of the generic feedback data reveals the following:



It is not surprising that the workshops saw a larger number of negative feedback. Coming to an open forum allows attendees to voice any negatives fully and forcefully. However it is good to note that there are a significant number of recommendations which have also been made. Indifferent feedback consisted of observations about health conditions in general rather than about services at the Trust. For the ease of reporting purposes, indifferent or generic feedback has not been included in illustrative examples. If we look further into each groupwork session we can see what views were expressed in greater detail on a theme by theme basis, starting with the theme of Access.

| Theme – Access | | |
|----------------|-------------------------------|---|
| Туре | Observations | Examples |
| Positive | Feeling safe within the Trust | A patient mentioned they always feel safe and happy to come to Radbourne. |
| Positive | Positive patient experiences | Continuation of services - forming long term safe/trusting relationships |

| Negative | GPs referral criteria seen as an barrier to accessing services | "GPs limited experience of mental health can delay referral" |
|----------|--|---|
| Negative | Use of out of area beds can be restrictive for carers and family members | "Use of out of area bed can be a barrier to access by carers to their relatives" |
| Negative | Need for better cohesion between services | "Drug and alcohol workers - inpatients cannot access this - not a seamless service" |
| Negative | Need for continuity of care | "Having a number of different workers delivering a service - have to build and rebuild and start again with each new worker - not a quality of service" |



(Healthwatch Derby Chair Steve Studham networking at the Kingsway workshop, Think Healthy 2014

Moving on from the theme of access, we now focus on the theme of Information:

| Theme – Informatio | n | |
|--------------------|---|---|
| Туре | Observations | Examples |
| Positive | Positive examples of information and feedback | "Feedback is ok, information good" |
| Negative | Frustration at having to repeat information | "Have to tell everybody, fed up of telling same story all over again" |
| Negative | Better provision of technology and IT support | "Service users have no option to print. Mobile computer not user friendly, often no internet connection" |

The next theme to be explored is that of Dignity.

| Theme – Dignity | | |
|-----------------|---|--|
| Туре | Observations | Examples |
| Negative | Some feedback processes may not be suitable | "Feedback forms/process alienates hard to reach groups/minorities - no access to services or internet. Golden question - difficult for parents whose first language is not English - missed feedback. Make feedback process easier not just survey questionnaires. Feedback loop too long, difficult to pick apart and dehumanising" |
| Negative | Negative perceptions of the Trust | "Perceptions of restrictions on services can make people feel not worthy of making a complaint" |
| Negative | Negative patient experiences shared | "Limited access to privacy (when distressed)" |

Moving on we look at the theme of Environment.

| Theme – Environment | | | |
|---------------------|------------------------------------|--|--|
| Туре | Observations | Examples | |
| Positive | Good facilities highlighted | "Radbourne and Hartington are accessible, not locked up everywhere. Radbourne - Facilities and activities good – gym and snooker tables encourages patients to socialise and recover. Day hospital provide lots of different 'themed rooms for service user e.g. reminiscent rooms, art rooms. Radbourne & Hartington - Bright, light, clear, clean, tidy, secure (visitors offered alarms)" | |
| Negative | Negative patient experience shared | "Not feeling safe inpatient services - sometimes so insecure that patients are sleeping on handbags!" | |

The last theme focused on Improvements.

| Theme – Improvement | ents | |
|---------------------|--|---|
| Туре | Observations | Examples |
| Positive | Acknowledgement of Trust's positive care | "The Trust also does a large amount of extremely good and positive work - this should not be forgotten. Once service is in place, there is evidence of good practise" |
| Negative | Continuity of care and service cohesion | "There is poor transition actoss pathways - there are databases that do not talk to each other - the whole |

| | | system needs to speak to each other" |
|----------|--|---|
| Negative | GPs highlighted as an area which lets mental health service users down | "GPs need specialist resources such as a mental health nurse. GP waiting times for appointment for mental health patients, and specialist mental health expertise needed" |
| Negative | Travel provision hinders and affects patient experience | "A bus stop is needed nearer to Radbourne as many patients and carers have got mobility issues and it becomes too much for them" |

Our workshops were designed to look at Trust services, and also to enable attendees to take part in a food tasting session. It was important to ensure the workshops had an element of fun and inclusivity as well as looking at the serious task of service appraisal by service users. Attendees were encouraged to give gold, silver or bronze ratings for the variety of food on offer. The food tasting aspect was widely appreciated as a novel way of providing feedback on an essential part of inpatient stay.

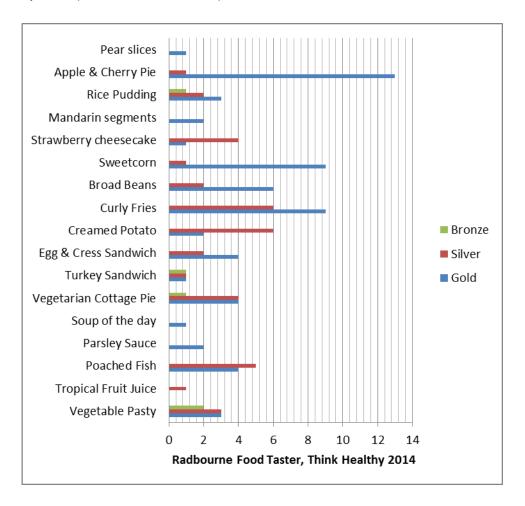
| | GOLD | SILVER | BRONZE | FOOD GOLD SILVER |
|-------------------|---------|--------|--------|----------------------|
| APPLE JUICE | | | | TROPICAL JUICE |
| POACHED FISH | 1 11 | 1/1 | | VEGETABLE PASTY |
| V. COTTAGE PIE | W | 1/ | 1 | C/ONION ROLL |
| TURKEY SANDWICH | Wil | 11 | | HAM/PORK ROLL |
| TUNA SALAD | | 1 | | SAROINE SALAD |
| REAMED POTATO | 1.11/11 | VVV | 1 | JACKET POTATO |
| BROAD BEANS | 111 | 1 | | BAKED BEANS |
| WEET CORN V | XIII | 1 | | TANESSEY SE |
| TRANBERRY C. CAKE | V _ | V | | APPLE/CHERRY AE NIVA |
| ANDARINS | // | 1 | 1 | PEAR |
| CE PUDDING | V | V | - | FRUIT YOUTHURT |

(Foodtaster sheet, Think Healthy Generic Workshops, 2014)

Food eaten within the Radbourne unit was available for the Radbourne workshop, similarly food eaten within the Kingsway site was available for the workshop in Kingsway. The Trust generously provided a sample of its food provision free of cost for the purposes of the two generic workshops. We have analysed the findings from the food taster, and the results are listed in the following section.

Generic Workshops Food Taster Results

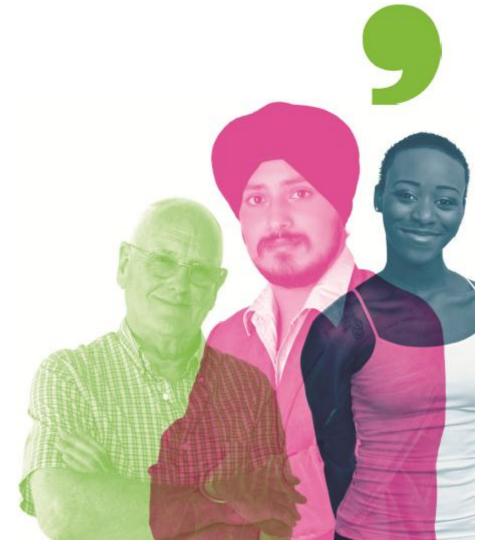
The food served at both workshops were individual to that Trust site, and was taken from the menu of the day. For the Radbourne our ratings system (Gold, Silver, Bronze) shows:



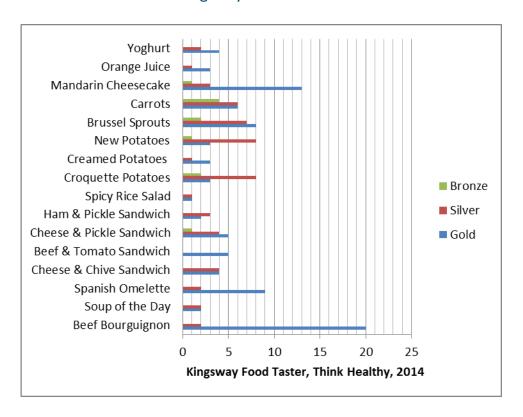
| RADBOURNE | | | |
|------------------------|------|--------|--------|
| Name of Dish | Gold | Silver | Bronze |
| Vegetable Pasty | 3 | 3 | 2 |
| Tropical Fruit Juice | 0 | 1 | 0 |
| Poached Fish | 4 | 5 | 0 |
| Parsley Sauce | 2 | 0 | 0 |
| Soup of the day | 1 | 0 | 0 |
| Vegetarian Cottage Pie | 4 | 4 | 1 |
| Turkey Sandwich | 1 | 1 | 1 |
| Egg & Cress Sandwich | 4 | 2 | 0 |
| Creamed Potato | 2 | 6 | 0 |
| Curly Fries | 9 | 6 | 0 |
| Broad Beans | 6 | 2 | 0 |

| Sweetcorn | 9 | 1 | 0 |
|-----------------------|----|---|---|
| Strawberry cheesecake | 1 | 4 | 0 |
| Mandarin segments | 2 | 0 | 0 |
| Rice Pudding | 3 | 2 | 1 |
| Apple & Cherry Pie | 13 | 1 | 0 |
| Pear slices | 1 | 0 | 0 |

This makes for interesting observations. In our outreach feedback section (Appendix 8) we can see comments about the food served at the Radbourne Unit. Some of those who have provided confidential feedback during our outreach sessions, and also through other means such as our survey have indicated that the food at the Radbourne has a mixed reception. Some patients prefer the generous portions whereas others have commented that it is not a healthy option. Staff members have noted that there needs to be more of a healthy option. The above sample menu indicates that although there are more calorific options such curly fries, and apple cherry pie on the menu – it also has the availability of vegetables, soups, and fresh fruit. So much of the feedback that we have received is sometimes about the perception rather than the choices. The Trust may need to do more to highlight the healthy options it already lists on the menu. Apart from the ratings we also had one comment listed on the food taster page about the temperature of the dessert bowls for the apple cherry pie being too hot, and the cutlery needing to be more robust.



The food taster at the Kingsway site revealed:



| KINGSWAY | | | |
|--------------------------|------|--------|--------|
| Name of Dish | Gold | Silver | Bronze |
| Beef Bourguignon | 20 | 2 | 0 |
| Soup of the Day | 2 | 2 | 0 |
| Spanish Omelette | 9 | 2 | 0 |
| Cheese & Chive Sandwich | 4 | 4 | 0 |
| Beef & Tomato Sandwich | 5 | 0 | 0 |
| Cheese & Pickle Sandwich | 5 | 4 | 1 |
| Ham & Pickle Sandwich | 2 | 3 | 0 |
| Spicy Rice Salad | 1 | 1 | 0 |
| Croquette Potatoes | 3 | 8 | 2 |
| Creamed Potatoes | 3 | 1 | 0 |
| New Potatoes | 3 | 8 | 1 |
| Brussel Sprouts | 8 | 7 | 2 |
| Carrots | 6 | 6 | 4 |
| Mandarin Cheesecake | 13 | 3 | 1 |
| Orange Juice | 3 | 1 | 0 |
| Yoghurt | 4 | 2 | 0 |

Comments for Kingsway's food included difficulty in accessing orange juice carton, and problems in getting yoghurt lids off. Overall the attendees commented that they enjoyed the food taster session and felt the Trust

provides a good standard of food for its patients.

Hartington Unit Food Taster

In addition to the generic workshop food tasting sessions, our outreach team were also invited to do a food taster at the Hartington Unit, where we tasted the following dishes.

Mushroom soup
Salmon and pasta in a spinach sauce
Chicken and ham pie
Chipped potatoes
Carrots
Gravy
Strawberry and apple crumble with custard
Rice pudding

We found that everything was hot, there were good portion sizes and overall dishes were flavourful and tasty. Some comments received about the food at the Hartington Unit during our outreach session included:

"On the whole though the food is quite good"

"Sandwiches varieties are very limited and I would have preferred a better selection"

"The food's ok but mundane - they're on a budget, it's the best they can do."



(Group Session, Kingsway Think Healthy Workshop, 2014)