

Progress against the 2021/22 Grading

Key:

| Grading rating | Meaning |
|----------------|-------------|
| E | Excelling |
| A | Achieving |
| D | Developing |
| U | Undeveloped |

Objective 1: Better Health Outcomes for All

Narrative: The NHS should achieve improvements in patient health, public health and patient safety for all, based on comprehensive evidence of needs and results

| Outcome | Previous Grading Panel rating | Recommended Grading Panel rating | Our actions | Documentary evidence |
|---|-------------------------------|----------------------------------|--|---|
| 1.1 Services are commissioned, procured, designed and delivered to meet the health needs of local communities | E | E | <p>The use of "RECITE" app on Trust website enables users whose first language is not English to change the language of the text and it includes audio functionality. The assistive toolbar supports a diverse range of people, including those with disabilities by allowing people who visit our websites to customise our site in a way that works best for them.</p> <p>Worked with AccessAble to ensure detailed accessibility guides for each of the main Trust sites. Patients and staff can use online guides to find out about access to all the Trust's buildings.</p> <p>Bedfordshire and Luton Adults</p> <p>Pulmonary Rehabilitation Education Video Transcripts - Video content can be translated through the online Recite feature when English is not spoken as a first language. Feedback was received that the audio was difficult to hear, transcripts help participants follow the audio.</p> | <p>Trust website Service websites</p> <p>Trust website Service websites</p> <p>Service Website and Information. Q2 Co-Production report for TWWTG</p> |

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| | | | <p>Doccla – Remote Health Monitoring Project - Co-Production Lead and Project Support Manager (from Service Redesign) held a workshop to consider and identify motivational messages to engage patients in their health more actively. Service Users gave suggestions on how they continued to remain healthy and they were asked to share learning that may be useful to others.</p> <p>In the workshop it was agreed that service users should be able to turn off the motivational text messages and alter how frequently they are received. Messages should be sent in response to concerns staff monitoring the readings have rather than indiscriminately. Some service users declined to participate on Doccla having originally agreed to. This was driven by concerns about taking their own vital sign readings and using the Doccla phone to submit readings. Workshop participants also felt that some older people had concerns over data security and sharing intimate details about themselves on digital platforms. In response to this project partners will address this issue in communication with service users.</p> <p>Bedfordshire Adults Acquired Brain Injury Unit Focus Group Discussion - Co-Production Lead and a Trainee Clinical Psychologist, hosted an online roundtable discussion with seven service users and family who had received care from the Bedfordshire Adults Acquired Brain Injury during the pandemic. It provided an opportunity to listen to service users about what worked well, what did not work well, areas for improvement and thoughts on receiving care online. The feedback will be used by the service to when agreeing priorities. The migration of service delivery to online platforms and whether technology dehumanises care featured in the focus group and remains a line of enquiry.</p> <p>Nutrition and Dietetics Service - Consultation with 71 service users to gather views on how they wish to access the service following the Covid19 pandemic. The feedback is used to plan services that respond to service user needs. The service users preferences varied (adults preferring face to face and children virtual) so the need to offer flexibility, in combination with clinical judgement, was identified.</p> | <p>Co-Production report for TWWTG</p> <p>Co-Production report for TWWTG</p> <p>Co-Production report for TWWTG</p> |

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| | | | <p>Bedfordshire Children</p> <p>SEND 0–19 Co-production Group - Dynamic discussions were had identifying areas of strength and challenge with regards to children and young people with SEND in the 0-19 service. The aims of this group are to review any areas of best practice or improvement to develop an action plan which will include implementation of training needs, information and resources for the 0-19 practitioners with the overall outcome being to ensure as a universal service early identification of SEND needs and support is a key priority.</p> <p>A film has been developed by young people in Bedfordshire with SEND for the professionals that they are supported by; 'Top Tips for professionals'. The film can be viewed here: https://vimeo.com/587756234/67d87a2305. The film follows feedback that young people experience varying levels of satisfaction from the interactions they have with the professionals working with them, and therefore the film and supporting written resource acts as a prompt and training tool to support practitioners to deliver best practice.</p> <p>Neurodiversity Diagnosis Support Pack - A co-produced multimedia resource tool designed and developed to support, inform, empower and inspire families following a diagnosis of a neurodiversity has been launched. The pack was developed in collaboration with Bedfordshire and Luton Community Paediatric Service, Child and Adolescent Mental Health Services (CAMHS), Local Authority, third sector partners and parents and young people.</p> <p>Baby Friendly Team - The Bedfordshire Baby Friendly Team has collaborated with the trust-wide Learning Difficulties project group, created to review how CCS 0-19 services can support parents with additional learning needs to improve the outcomes for their children. This has been identified as an area for improvement within serious case reviews. This work is focused on ensuring that the needs of these parents are being met by services and that developing services begins with the voice of these parents. Two Bedfordshire mothers with a learning disability, who have breast fed their babies, are</p> | <p>Co-Production report for TWWTG</p> <p>Co-Production report for TWWTG</p> <p>Co-Production report for TWWTG</p> |

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| | | | <p>working as part of this group to ensure that breastfeeding support is inclusive and supportive for all mothers.</p> <p>Gender Identity Awareness in School Nursing – The service received feedback that staff could be more informed about gender identity issues. An 18 year old transgender person shared their lived experience to further educate school nursing professionals. The outcomes of which is that school nursing teams are now better equipped and confident in supporting young people and their school communities with gender identity issues. The training has was recorded with permission to store for wider use. Feedback from the practitioners who attended this training was incredibly meaningful and highlighted the impact of utilising lived experience in professional development.</p> <p>Luton Children’s Services</p> <p>Something Feels Different (SFD) - Luton Parent Carer Voice explained that many families from seldom heard or marginalised communities, where English may be a second language, may hold cultural beliefs about the reason for nuances in their children’s behaviour and have little or no understanding of neurodiversity or how to access help. The Trust Equality Diversity and Inclusion (EDI) Lead supported the project by researching the various communities in Luton and identifying the minority communities that would benefit from being prioritised. The group recognised that the Neurodevelopmental Disorder (NDD) pathway met the needs of the project in helping families to think about what their concerns are when they realise very early on that ‘something feels different’ in the way their child sees, responds to and exists in the world.</p> <p>The group co-produced a script taking the viewer through a sequence of questions that may prompt them to think about their own circumstances, why they may not have accessed help so far, how to access help and a message from a diverse group of families in a number of languages encouraging them to access help, with links to the NDD pathway, Diagnosis Support Pack and the local offer.</p> | <p>Co-Production report for TWWTG</p> <p>Co-Production report for TWWTG</p> |

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| | | | <p>Norfolk and Waveney Children</p> <p>The N&WCYPHS Digital Platform - Families, young people and stake holders continue to be consulted on the content and design of the Just One Norfolk digital platform. Focus groups were held for parents to support with the new infant feeding website pages. These took place in the day and evenings to enable first time parents, young / teenage parents, fathers and partners to be involved.</p> <p>Active project & Website design - The Norfolk SEND local offer website has been updated and is now refreshed; the group has now begun to share the new website with other stakeholders, families and young people. The new SEND logo was consulted on, finalised and is now in the public domain. All of the information that mainstream schools need to provide SEN support is easier to find and much more comprehensive</p> <p>Ambulatory Care</p> <p>iCaSH Online Focus Group, Bookings and Access - Six online focus groups took place and an online survey captured input from users of the iCaSH services. Combining the discussions from these groups, the survey data, Friends and Family Test responses, and Complaints information has supported the development of recommendations for the service redesign project.</p> <p>A summary of the recommendations has been sent to people who took part in the focus groups. These people have also been invited to be a part of developing and implementing the changes at a time in the future. Two people have expressed an interest in this at present.</p> <p>DynamicHealth Virtual Consultations in MSK Physiotherapy Workshop – The NHS England and NHS Improvement (NHSE/I) – East of England Outpatient Transformation Team held an online workshop on the use of virtual consultations within MSK physiotherapy. Patient voice was shared at the beginning of the workshop. The Co-</p> | <p>Co-Production report for TWWTG</p> <p>Co-Production report for TWWTG</p> <p>Co-Production report for TWWTG</p> <p>Co-Production report for TWWTG</p> |

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| | | | <p>production Lead worked with two patients who had had positive and negative experiences respectively, to prepare them for the session and introduce them to the NHSE/I team</p> <p>Cambridgeshire Children</p> <p>Wisbech Digital Communications Platform – Aim to improve engagement with the diverse communities in Wisbech, which has a high Eastern European demographic, through digital communication. Work has been in collaboration with The Rosmini Centre who provide advice and information to non-English speaking residents and has resulted in the production of leaflets written in the home language, with the language identified by the home country flag.</p> <p>Getting Ready for Change – Pilot project to promote the ongoing health of children and to offer supportive early intervention, resources and appropriate signposting for those who may have difficulty with transition and/or have identified health needs. Parents and young people were recruited to assist with co-producing the digital health and self-care questionnaire about health and child’s readiness for transition to secondary school and post 16 education. Feedback was sought from parents and young people who used the questionnaire to evaluate how useful they found it.</p> <p>Volunteers</p> <p>Bedfordshire Breastfeeding Buddies - a small cohort continue to take part in a telephone support project, and new Buddies are being recruited to expand this volunteer team. Buddies will shortly be returning to face to face volunteering and the Baby Friendly Team has designed a feedback flyer for them to present to families they support in order to encourage feedback about their experience of being supported by a volunteer. This feedback is reviewed on a monthly basis by the co-production lead and quarterly by the volunteer lead.</p> | <p>Co-Production report for TWWTG</p> <p>Co-Production report for TWWTG</p> <p>Q2 Volunteer Report</p> |

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| | | | <p>Medicines Safety and Governance Group – A lay person has continued to volunteer throughout the pandemic.</p> <p>Just One Norfolk - Community Ambassador volunteers have continued their role throughout the pandemic as this opportunity is provided online.</p> | |
| <p>1.2 Individual people's health needs are assessed and met in appropriate and effective ways</p> | <p>A</p> | <p>A</p> | <p>Cambridgeshire Children's Getting Ready for Change Pilot project aims to promote the ongoing health of children and to offer supportive early intervention, resources and appropriate signposting for those who may have difficulty with transition and/or have identified health needs. A digital health and self-care questionnaire asks about health needs and child's readiness for transition to secondary school and post 16 education.</p> <p>Contacts made to services via centralised hubs including Single Point of Access – Just One Number and Health HUBs are assessed and directed to the most relevant team to meet the need of the service user. Service users are also signposted to partner organisation if they are best placed to offer support. This information is also available on the service webpages.</p> <p>The Trust uses telephone systems for service users to contact iCaSH Services. It was identified that this made accessing services difficult for service users with hearing difficulties. Systems have been put into place to enable all user to contact services.</p> | <p>Co-Production report for TWWTG</p> <p>Service Specifications Websites</p> <p>Patient Story</p> |
| <p>1.3 Transitions from one service to another, for people on care pathways, are made smoothly with everyone well informed</p> | <p>A</p> | <p>A</p> | <p>Norfolk and Waveney Children - Maternity voices partnership (MVP) West, East and Norwich - Collaborative working with service users and professionals regards antenatal and postnatal services, breastfeeding services.</p> <p>Cambridgeshire Children's Getting Ready for Change is a project to promote the ongoing health of children who have difficulty with transition and/or have identified health needs. A digital health and self-care questionnaire about health and child's readiness for transition to secondary school and post 16 education is being piloted.</p> | <p>Co-Production report for TWWTG</p> <p>Project documents.</p> |

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| <p>1.4 When people use NHS services their safety is prioritised and they are free from mistakes, mistreatment and abuse</p> | <p>A</p> | <p>A</p> | <p>Trustwide we ensure that safety for the people who use our services is prioritised</p> <ul style="list-style-type: none"> • Staff Mandatory training –e.g. safeguarding adults and children. • The use of patient feedback surveys stored on our IQVIA database. • The use of Datix – to record and investigate incidents, formal and informal complaints and to record the learning, outcomes and evidence of actions being completed. • Trust wide Risk Register in place, to ensure any identified risks are addressed according to an agreed plan and timeline. • Established care pathways in place with Safeguarding services to ensure the appropriate and effective safeguards are in place for all service users at risk of or exposed to Female Genital Mutilation or other cultural practices Established and specific safeguarding policies and procedures in place. • Established networks and contacts within local council safeguarding boards • Supported by Trust wide adult and children safeguarding teams. • Duty of Candour Policy • Currently seeking to recruit Patient Safety Partners. <p>iCaSH</p> <ul style="list-style-type: none"> • Online STI screening platform has safeguarding measures built into the application, implementing a means by which direct contact with an iCaSH staff member is actioned as and when any Safeguarding risk is identified within the system • Online STI screening platform includes the facility for the service user to request a call back from an iCaSH staff member when required. • Safeguarding measures built into our Telephone Consultation model ensuring a face to face consultation can be provided as and when any Safeguarding risk is identified. • Medicines Management policies and procedures in place across all iCaSH services supporting the delivery of safe and effective treatment processes | <p>Policies, SOPS, guidelines and service specifications.</p> |

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| <p>1.5 Screening, vaccination and other health promotion services reach and benefit all local communities</p> | <p>A</p> | <p>A</p> | <p>The use of “RECITE” app on Trust website enables users whose first language is not English to change the language of the text and it includes audio functionality. The assistive toolbar supports a diverse range of people, including those with disabilities by allowing people who visit our websites to customise our site in a way that works best for them. This enables service users to access information about health promotion.</p> <p>DL Languages are used for translation services and there is contact monitoring in place.</p> <p>Norfolk Gypsy / Romany and Travellers Families Community Event - In response to a request from the local authority one of the services Gypsy and Romany Traveller (GRT) Champions attended a community event at a GRT site in Great Yarmouth. A local GP was offering the Covid vaccination to families and the N&WCYPHS member of staff attended as the familiar face to the community and to promote N&WCYPHS.</p> <p>Webinars - A programme of webinars to enable and support engagement in services and as a platform for providing advice guidance and support was introduced using Just One Norfolk as a system delivery platform. Based on feedback from families and the results of a poll on the best platform to use for the webinars, it was decided for these to be hosted on Microsoft. Infant Feeding webinars were held in collaboration with Local Maternity System (LMS), midwifery feeding champions from all three Acute Trusts and the NCYPHS breastfeeding champions. To reflect the CCG and Acute footprint in Waveney Healthy Child Programme colleagues in Suffolk were also invited to co-present.</p> <p>The first webinar was very successful with over 60 families in attendance. A further webinar was held with over 30 attendees. A service user feedback survey has now been incorporated at the end of the webinars to support the continued development of these and identify subjects for future webinars. It is planned that these will take place on a monthly basis going forward and topics increased.</p> <p>Bedfordshire: 0-5 Service delivers the new born blood spot screening programme for all community groups in Bedfordshire.</p> | <p>Website</p> <p>Co-Production report for TWWTG</p> |

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| | | | <p>iCaSH services</p> <ul style="list-style-type: none"> • iCaSH services are commissioned to deliver services to people aged 13yrs+. • Online screening available to patients aged 16yrs and over. • Chlamydia screening programme running in county for 15 – 24 year olds, accessible via website and pick up points in primary care. • C-Card delivery throughout the counties, with online registration for people aged 16yrs+ • F2F registration provided for people aged under 16yrs, as a means of ensuring all safeguarding elements are assessed and addressed if necessary • Longer appointment times allocated for young people U18yrs accessing the service. • Evening and weekend provision to support access for people in education / employment. • HPV vaccination offered to MSM cohort 45yrs of age and under • Hepatitis A and B vaccinations offered to patients when appropriate | |

Objective 2: Improved Patient Access and Experience

Narrative: The NHS should improve accessibility and information, and deliver the right services that are targeted, useful, useable and used in order to improve patient experience

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| <p>2.1 People, carers and communities can readily access hospital, community health or primary care services and should not be denied in unreasonable grounds</p> | E | E | <p>Disability</p> <p>AccessAble have been very responsive and have been able to share temporary updates to surveys for areas where there has been long term work e.g. Huntingdon Oak Tree.</p> <p>AccessAble gives us best practice guidance if any building adaptations are suggested after survey- all have been reviewed and some work scheduled. This year we have surveyed:</p> <ul style="list-style-type: none"> • 0-19 East and West Norfolk, Havenbridge House and Vancouver. • 0-19 Services Bedford- Woburn Court • Dental- Rowan Lodge Wisbech, and Hillside Suffolk. • Head Office at St Ives • iCaSH Lowestoft, Vancouver, and Milton Keynes • MSK Rowan Lodge Wisbech. <p>All service letters now have the following footer to enable patients to find a site guide before attending a face to face appointment : how to access our buildings (AccessAble), please visit www.cambscommunityservices.nhs.uk and follow the links or contact us.</p> <p>Dental feedback from a disabled service user at Midgate, where as part of the refurbishment we replaced the disabled toilet with a Big John. Service users reports that it is difficult to transfer onto. A review of the facilities has started.</p> <p>iCaSH Services offer longer appointment times allocated for young people under 18yrs accessing the service and evening and weekend provision to support access for people in education / employment.</p> | <p>Website and AccessAble site survey pages</p> <p>All clinical letters</p> <p>Feedback April 22</p> <p>Service Provision</p> |

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| 2.2 People are informed and supported to be as involved as they wish to be in decisions about their care | E | E | <p>Doccla – Remote Health Monitoring Project – Service users have wearable technologies and devices to routinely monitor their vital signs involving them in monitoring their health.</p> <p>Bedfordshire and Luton Children’s Neurodiversity Diagnosis Support Pack is a tool to support, inform, empower and inspire families following a diagnosis of a neurodiversity. Providing them with the information to enabled involvement in their care.</p> <p>Service websites offered specific service and condition information to service users.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2.3 People report positive experiences of the NHS | A | A | <p>Service users/carer feedback in 2021/22 was incredibly positive with 96.96% of the 28,298 people who answered the FFT question saying the service provided was very good or good.</p> <div data-bbox="725 724 1534 1249" data-label="Figure"> <table border="1"> <caption>Cambridgeshire Community Services NHS Trust Friends and Family Test recommend scores compared to average National Community Trust scores.</caption> <thead> <tr> <th>Month</th> <th>National Community Trust Comparator %</th> <th>CCS Positive %</th> <th>Trust target</th> </tr> </thead> <tbody> <tr><td>April</td><td>~94%</td><td>~98%</td><td>90%</td></tr> <tr><td>May</td><td>~94%</td><td>~98%</td><td>90%</td></tr> <tr><td>June</td><td>~94%</td><td>~97%</td><td>90%</td></tr> <tr><td>July</td><td>~93%</td><td>~96%</td><td>90%</td></tr> <tr><td>August</td><td>~93%</td><td>~96%</td><td>90%</td></tr> <tr><td>September</td><td>~93%</td><td>~95%</td><td>90%</td></tr> <tr><td>October</td><td>~92%</td><td>~95%</td><td>90%</td></tr> <tr><td>November</td><td>~93%</td><td>~95%</td><td>90%</td></tr> <tr><td>December</td><td>~93%</td><td>~96%</td><td>90%</td></tr> <tr><td>January</td><td>~94%</td><td>~96%</td><td>90%</td></tr> <tr><td>February</td><td>~94%</td><td>~95%</td><td>90%</td></tr> <tr><td>March</td><td>~94%</td><td>~97%</td><td>90%</td></tr> </tbody> </table> </div> <p>We received 28,622 positive comments and compliments about our services during the year.</p> | Month | National Community Trust Comparator % | CCS Positive % | Trust target | April | ~94% | ~98% | 90% | May | ~94% | ~98% | 90% | June | ~94% | ~97% | 90% | July | ~93% | ~96% | 90% | August | ~93% | ~96% | 90% | September | ~93% | ~95% | 90% | October | ~92% | ~95% | 90% | November | ~93% | ~95% | 90% | December | ~93% | ~96% | 90% | January | ~94% | ~96% | 90% | February | ~94% | ~95% | 90% | March | ~94% | ~97% | 90% | IQVIA survey results |
| Month | National Community Trust Comparator % | CCS Positive % | Trust target | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| April | ~94% | ~98% | 90% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| May | ~94% | ~98% | 90% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| June | ~94% | ~97% | 90% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| July | ~93% | ~96% | 90% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| August | ~93% | ~96% | 90% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| September | ~93% | ~95% | 90% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| October | ~92% | ~95% | 90% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| November | ~93% | ~95% | 90% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| December | ~93% | ~96% | 90% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| January | ~94% | ~96% | 90% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| February | ~94% | ~95% | 90% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| March | ~94% | ~97% | 90% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| | | | Positive feedback has been received from volunteers via surveys which are sent when they leave their volunteering placement. Volunteers are encouraged to provide adhoc feedback throughout their volunteering placement, and there is a plan to introduce an annual volunteer survey (along similar lines to the staff survey) to ensure that the volunteer voice is heard. | |
| 2.4 People's complaints about services are handled respectfully and efficiently | E | E | <p>Offer the opportunity to feedback via a survey to all complainants. Feedback is reviewed and used to inform service improvements.</p> <p>Feedback received into PALS, via email and verbally, has repeatedly quoted efficiency relating to speed of response; some have expressed their surprise at the responsiveness during the pandemic.</p> <p>The complaints team work with complainants to ensure all the issues they raised are addressed by using a complaint plan document which is agreed by the complainant. This is the basis for the investigation and the response letter is based on these concerns. The complainant is always asked for their preference on how they would like to be communicated with, phone, email or letter.</p> <p>We always signpost to advocacy services.</p> | IQVIA Survey, Policy, Datix records. |