Fifth Domain – Accessible and Responsive Care

Patients receive services as promptly as possible, have choice in access to services and treatments, and do not experience unnecessary delay at any stage of service delivery or the care nathway

Core Standard	Prompts	Baseline Position	Compliant Level	Assurance
C17 The views of patients, their carers and others are sought and taken into account in designing, planning, delivering and improving healthcare services.	The healthcare organisation seeks the views of patients, carers and the local community, including those facing barriers to participation, in accordance with Strengthening Accountability, patient and public involvement policy guidance – Section 11 of the Health and Social Care Act 2001 (Department of Health 2003) and, as appropriate, the associated practice guidance, and the Race Relations Act 1976 (as amended).	Views are obtained through a variety of methods: through PALS route, the Carers Support worker, the Complaints procedure, ICAS (Independent Complaints Advocacy Service), or the Patient Representatives (Age Concern advocacy service). PALS leaflets (with a tear off slip with a freepost address for comments) and comment cards are available in all areas of the organisation and in the local community for patients. On an annual basis every household in Rushcliffe receives 'Your Guide to Local Health services', which has a tear off slip asking for feedback about the local NHS. Staff are encouraged to ask for feedback at all stages of the patient journey e.g. when developing a 'Patient Information' leaflet for the Home Loans service, a tear-off slip was included asking for patient feedback. Under the Health & Social Care Act 2001, the PCT is committed to seeking the views of its residents from major re-design e.g. new health centre and a new Treatment Centre. The PCT has a Consultation Strategy outlining key consultations for capital developments. Patient and public involvement is closely linked to diversity & essence of care, which seek to involve all members of the public. Travelling expenses and carers expenses are offered. Initiatives include developing specific consultation with members from the South Asian community around heart disease. Views are obtained through a variety of methods: through PALS route, the Carers Support worker, the Complaints procedure, ICAS (Independent Complaints Advocacy Service), or the Patient Representatives (Age Concern advocacy service).	Compliant	NHS Staff Survey CHI Clinical governance Review Patient and Public Involvement Report Clinical Governance Committee NHS Patient Survey

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Core Standard	Prompts	Baseline Position	Compliant Level	Assurance
17 The views of	The healthcare organisation takes into account the	PALS leaflets (with a tear off slip with a freepost address		NHS Staff
atients, their carers and	views of patients, carers and the local community	for comments) and comment cards are available in all		Survey
thers are sought and	when designing, planning, delivering and improving	areas of the organisation and in the local community for		OUI Olimina
ken into account in	healthcare, in accordance with Strengthening accountability, policy guidance - Section 11 of the	patients. On an annual basis every household in Rushcliffe receives 'Your Guide to Local Health services',		CHI Clinica
esigning, planning, elivering and improving	Health and Social Care Act 2001 (Department of	which has a tear off slip asking for feedback about the		governance Review
ealthcare services.	Health 2003) and, as appropriate, the associated	local NHS. Staff are encouraged to ask for feedback at all		Keview
eattricare services.	practice guidance.	stages of the patient journey e.g. when developing a		Patient and
	practice galdarios.	'Patient Information' leaflet for the Home Loans service, a		Public
		tear-off slip was included asking for patient feedback. The		Involvement
		PCT uses a community development approach to		Report
		involving local people in planning e.g. Rushcliffe Health		
		Network, a local group of people - 180 strong, willing to		Clinical
		help PCT in improving NHS and Rushcliffe PPI Forum.		Governance
		This Network was set up and is co-ordinated by the PCT		Committee
		in partnership with Rushcliffe Council for Voluntary		NII 10 D (
		Service. Head of Public Involvement is an ex-officio		NHS Patier
		member of the PPI Forum. PALS leaflets and comment cards are available in all areas of the organisation for		Survey
		patients and in wider community e.g. libraries, council		
		premises, voluntary sector venues. 'Patients Champions'		
		are recruited in many PCT teams and GP surgeries; these		
		are staff trained in raising awareness about PALS and		
		other PPI initiatives. PALS coordinator very proactive in		
		this area and has heavily promoted the PALS service		
		within the PCT, with independent contractors and with		
		other voluntary & statutory agencies. The NHS Patient		
		Survey and other patient satisfaction surveys provide a		
		basis for service development and this is further explored		
		in the PPI forum. There is a working group examining the		
		NHS Patient Survey who will make recommendations to the Board and to independent contractors where the		
		results directly concern them.		
		results directly concern them.		

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Core Standard	Prompts	Baseline Position	Compliant Level	Assurance
c18 Healthcare organisations enable all members of the population to access services equally and offer choice in access to services and treatment equitably.	The healthcare organisation has taken steps to ensure that all members of the population it serves are able to access its services on an equitable basis, including acting in accordance with the Sex Discrimination Act 1975, the Disability Discrimination Act 1995 and the Race Relations Act 1976 (as amended). The healthcare organisation has taken steps to offer patients choice in access to services and treatment, where appropriate, and ensures that this is offered equitably, taking into account Building on the best: Choice, responsiveness and equity in the NHS (Department of Health 2003).	Regular patient satisfaction surveys are carried out in services, this information is used to enhance delivery and change services to meet need. Frequent consultations with the public investigate issues of access, with particular emphasis put on needs of vulnerable groups e.g. older people, people with sensory/physical impairment, etc. Wider consultations with specific groups assists the PCT in ensuring fair access, e.g. with the South Asian community. Access is performance managed as a star rating indicator and is traffic lighted each month at the Board, currently the PCT is always traffic lighted as green constantly meeting the targets A Project Initiation Document has been completed for Choose and Book which was approved by the PCT Board in Feb. 2005. The PID comprehensively describes how Choose and Book will be implemented in the local health community. The PCT is currently rolling out choice on a speciality by specialty basis prior to Choose and Book being implemented. Choice is being offered by trained staff within a referral centre and all referrals are taken through the same process.	Compliant	Diversity Action Plan NHS Patient Survey CHI Clinical governance Review Patient and Public Involvement Report Clinical Governance Committee Choose and Book Project Group
that patients with emergency health needs are able to access care promptly and with nationally agreed timescales, and all patients are able to access services within national expectations on access to services.	This standard will be measured under the existing targets and new national targets assessments.	24/48 accesses to primary care is monitored through the monthly Director of Finance reports, this is constantly reported as green. Emergency Care Network is a multi agency forum that leads and monitors the compliance with national guidance, and takes steps to improve performance. Out of Hours service from NEMS is compliant with the Carson Report — Raising Standards for Patients, New Partnerships for Out of Hours Care.	Compliant	Emergency Care Network Out of Hours Commissioning Group Director of Finance Board Report