

Healthwatch Oxfordshire Board of Directors

Date of Meeting: November 11th 2014

Paper No: 7

Title of Presentation: Dignity in Care Project Proposal

This paper is for

Discussion

Decision

x

Information

Purpose and Executive Summary (if paper longer than 3 pages):

This paper sets out the detailed proposal for an “enter and view” project on the subject of Dignity in Care, to be delivered by HWO in partnership with Age UK Oxfordshire and to be launched with them at the Dignity in Care Awards on November 14th.

Financial Implications of Paper:

The project costs can be met from within the HWO core budget.

Action Required:

The Board is asked to approve this project proposal and to authorise the team to launch this project with Age UK Oxfordshire at their Dignity in Care awards on November 14th.

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DIGNITY IN CARE PROJECT

DRAFT FOR APPROVAL BY HWO BOARD

1. Background

1.1 Healthwatch Oxfordshire and AGE UK Oxfordshire are concerned that the voices of patients and carers need to be heard more clearly, in order to improve the dignity in care provided in a range of circumstances and settings.

1.2 Recurrent national scandals, reviews and campaigns have not helped solve the challenge of achieving dignity in care for all patients. Even the energetic and high-profile work programme led by the government and NHS to follow up the Mid-Staffordshire inquiry is unlikely to change the fundamental reality that patients and other recipients of care are unequal in the care relationship and relatively powerless to assert their rights to dignity and respect.

1.3 Progress has been made with the County Council's decision to abolish 15 minute care visits for personal care, but Healthwatch Oxfordshire has been made aware of a range of dignity in care issues that still need to be tackled. These were highlighted particularly in the following funded reports in 2014:

- Oxfordshire Family Support Network
- My Life My Choice
- Asian Women's Group
- GP Access (Patients Association)
- Deaf People (Sign Lingual)

1.4 Healthwatch Oxfordshire has been in discussion with SEAP, Oxfordshire Advocacy, and Age UK Oxfordshire – all of whom have voiced concerns that service users in Oxfordshire may not always be getting care that meets Dignity in Care standards.

1.5 HWO is also in the process of developing two separate but related projects:

- i. working with care homes to establish best practice for the setting up of Relatives Groups in Care Homes and
- ii. a study of the patient experience of discharge from Hospitals.

1.6 This dignity in care proposal will extend and complement the above pieces of work, drawing key partners together to consider best practice and to help ensure we deliver a high standard of dignity in care in Oxfordshire.

2. People and Organisations involved in the study

2.1 Healthwatch Oxfordshire would like to undertake this project in collaboration with Age UK Oxfordshire, the Oxfordshire Association of Care Providers, Oxfordshire County Council, Oxfordshire Advocacy, voluntary sector groups that have already been involved in project-funded work and those at all levels of providing care services, including relatives and volunteers.

2.2 Population groups in scope for the study would include:

- older people in care homes
- adults in receipt of care packages
- people with learning disabilities in residential settings or domiciliary care at home
- Asian Women (cared for at home)
- patients on medical wards in local hospitals

2.3 We intend to create a project steering group to oversee this work, which also includes representation from the following organisations:

- HWO
- Age UK Oxfordshire
- Oxfordshire County Council
- The Oxfordshire Association of Care Providers
- Oxfordshire Advocacy
- OUHT
- Patient Voice
- My Life My Choice
- Oxfordshire Family Support Network
- Asian Women's Group
- Organisations representing adults with disabilities

3. What we want to know

We already know a lot from research about the key factors which enable dignity in care eg the Dignity in care Commission, ([Delivering Dignity 2012](#)), Picker Institute, Royal College of Nursing.

3.1 For example [Social Care Institute for Excellence Report](#) research suggests there are eight main factors that promote dignity in care and contribute to a person's sense of self respect:

- Choice and control
- Communication
- Eating and Nutritional Care
- Pain management
- Personal Hygiene
- Practical assistance
- Privacy
- Social Inclusion

3.2 The [National Dignity in Care Council](#) has published a 10 point Challenge to all those involved in the provision of services. It recommends::

- Have a zero tolerance of all forms of abuse
- Support people with the same respect you would want for yourself or a member of your family
- Treat each person as an individual by offering a personalised service

- Enable people to maintain the maximum possible level of independence, choice and control
- Listen to people and support them to express their needs and wants
- Respect people's right to privacy
- Ensure people feel able to complain without fear of retribution
- Engage with family members and carers as care partners
- Assist people to maintain confidence and positive self-esteem
- Act to alleviate people's loneliness and isolation

3.3 This study will explore the reality of experience in Oxfordshire in order to raise awareness and intelligence about this important issue with providers and commissioners, and to secure their commitment to change. Through this project we will seek to discover, and share:

- People's experience of receiving care from Oxfordshire's care providers in a range of care contexts.
- The impact of the care they receive on their health and wellbeing and quality of life.
- What patients and carers say about dignity in care issues in Oxfordshire
- Examples of good practice
- Recommendations from local 'experts by experience' of where and how things might be improved as the basis of high level debate at County level with commissioners, providers and researchers

4. Why do we want to know this?

4.1 Healthwatch Oxfordshire is acting on intelligence from a range of sources to bring this issue to the foreground of providing and commissioning of services:

- National Concerns raised through exposures at Mid Staffordshire, Winterbourne, Old Deanery (Panorama July 2014)
- A perceived need from a range of organisations for more discussion and information about what might be happening in Oxfordshire
- Concerns raised through more than one of the 2014 grant-sponsored research projects (e.g. Oxfordshire Family Support Network, Asian Women's group)
- Expressions of interest in pursuing this theme from 2 charities working in the County: Age UK Oxfordshire and Oxfordshire Advocacy.
- The need for greater focus on this issue in relation to two projects already underway led by HWO (Relatives in Care Homes, Discharge from Hospital) as dignity in care is a key concern in both.

4.2 This will be a good way to build on existing relationships and develop and train volunteers from a diverse range of population groups. The culminating report will bring together a range of different perspectives to look at underlying issues and risks, build on current best practice, rally partners and achieve common aims for better outcomes in quality of care. The aim is to strengthen the focus on Dignity in Care within the planning and commissioning of services in Oxfordshire.

5. Project outline, scope and methodology

5.1 HWO and AGE UK Oxfordshire as joint leads will collaborate with other partners for this project which aims to bring the voices of those in receipt of care and those caring for them into the foreground of local debate through a qualitative study undertaken with a sample group whose membership spans a range of population groups and circumstances.

5.2 We wish to do this through

- Raising awareness of the project through the Dignity Every Day Awards Celebration in November 2014
- Developing volunteers from a diverse range of population groups to be able to undertake enter and view with and behalf of Healthwatch Oxfordshire (e.g. building on excellent work by MLMC and Asian Women's project) as well as key partners for whom this will inform their core work (Age UK Oxfordshire, Oxford Advocacy, Patient Voice)
- Exercising our powers to enter and view, in order to interview patients, relatives and carers about their experience of receiving care from a range of providers in Oxfordshire, in order to identify good and bad practice.
- Analysis of findings of questionnaires, case studies, digestion and reflection following the event, leading to the framing of questions and proposals for new or newly structured approaches to delivering dignity in care.
- Running an event (possible hosted by HEXI) for lead national (Picker Institute, OPAAL, RCN) and local professional and academics, and local experts by experience working in this particular field. This event would launch the findings of the qualitative research as a basis for exploring the question 'How do we know whether the horror stories shown on Panorama and reported elsewhere are happening in Oxfordshire, and if so, what do we do about it? What new approaches could be adopted for promoting and delivering best practice?'
- Production of a Project Report with a clear set of succinct recommendations for commissioners and providers, made by Healthwatch Oxfordshire and Age UK on the basis of evidence gathered from the qualitative research and the event held to discuss ways forward.

6. Detailed Tasks and milestones

6.1 The views of patients, carers and relatives will be sought via:

- Structured interviews, based on a formal questionnaire, and conducted by volunteers (including volunteers with Age UK Oxfordshire, Oxford Advocacy MLMC, Asian Women's Group, Patient Voice and others) who have been trained to undertake enter and view. These interviews will take place in hospitals, care homes and at home.
- Focus groups where this is more appropriate than individual questionnaires
- Case study based write ups of some of the best practice and worst practice examples arising from interviews.

6.2 These will be supplemented by:

- The views of experts, experts by experience and academics shared at the planned event
- A brief desktop review of published information and research of dignity in care which will set the context for the findings.

Findings will be analysed by the HWO team (or externally commissioned support), who will prepare a report that summarises the key themes to emerge from this analysis.

The project will be overseen by Rachel Coney, Chief Executive of Healthwatch and Paul Cann, Chief Executive of Age UK Oxfordshire, working with a steering group convened and serviced by HWO.

6.2 Milestones

DATE	ACTION	KEY PARTNERS
October	Seek initial feedback on this proposal from Age UK Oxfordshire. Attend National Dignity Council Annual Conference Tuesday 14th October 2014 (completed)	AGE UK Oxfordshire
October	Informal discussions with other partners Identify resource implications	
Early November	HWO Board approve draft project proposal in principle. Appoint project manager (internal to HWO or external consultant) Agree resource allocation including staff time.	
November	Launch project at Dignity Every Day Award Ceremony 2014	Age UK Oxfordshire, with steering group
Mid November	Invite partners to form initial steering group. Check interrelationship with Discharge Project and opportunities to dovetail volunteer training and questionnaires where appropriate – possibly joint launch Finalize project outline.	
Late November	Discussions with MLMC, AWG, Age UK Oxfordshire, OA and others to recruit volunteers for interviewing Other Enter and view volunteers recruited	MLMC AGE UK Oxfordshire, OA, AWG, and others
Late November	Desktop research into dignity in care, models of Advocacy, what we already know from other work (eg relatives in care homes)	
Mid December	Enter and view training complete Develop and agree questionnaires	HWO steering group
March	Enter and view trial sessions to test: <ul style="list-style-type: none"> • Questionnaires • Interviewing skills • Housekeeping and safeguarding arrangements with provider partners • Desktop research: Dignity in Care 	Steering group and volunteers

April	<ul style="list-style-type: none"> • 100 enter and view interviews conducted in variety of care settings (in addition to any questions which may be able to be incorporated into Discharge Project) • Questionnaires circulated to relevant professionals, via their professional bodies for return by the end of the month 	Steering group partners/volunteers
May/June	Conference/Seminar with National Speakers and presentation of local case studies from survey work	Steering Group, OPAAL National Dignity Council
June/July	Conference write up, Analysis complete and draft report circulated for comment/accuracy checks and to inform final contract negotiations.	Steering Group HEXI
September	Report launched	HWO/AGEUK Oxfordshire

HWO - Healthwatch Oxfordshire

AWG – Asian Women’s Group

MLMC – My Life My Choice

OA – Oxford Advocacy

HEXI – Health Experience Institute – Oxford University

OPAAL – Older people’s Advocacy Alliance

RCN – Royal College of Nursing

Resourcing the project

- 1 Project Direction – provided in kind by Age UK and HWO CEOs. Commitment to attendance at steering group meetings and other project discussions as required. HWO CEO to take overall responsibility and line manage project manager.
- 2 Project Manager – 1 element of a freelance contract funded entirely by HWO to deliver the project fund projects, assist with the discharge project and lead all aspects of this project. To be advertised asap.
- 3 Volunteer recruitment, training and expenses – to be funded entirely from HWO core budget. Age UK to actively encourage its volunteers to become accredited HWO enter and view volunteers and to promote this via Community Information Networks.
- 4 HWO to offer up to £500 to small voluntary organisations assisting with the project to meet their sundry expenses related to participating in the project.
- 5 Securing locations and agreement for enter and view activity – all partners to use their networks and influence to secure agreement once a list of preferred sites has been agreed by the steering group.
- 6 Project planning and logistics - to be undertaken by HWO funded project manager
- 7 Staging an event – HWO to approach HEXI about joint delivery on same resource basis as care.data event ie HWO to resource marketing and PR, HEXI to administer and provide venue and speaker costs/expenses.
- 8 Film and transcript costs (if required) to be split 3 ways between HWO, HEXI and Age UK
- 9 Report writing – to be undertaken by HWO funded project manager
- 10 PR and comms – HWO to resource via its contract with Firebird PR