

## Council of Governors: Summary Sheet

24<sup>th</sup> November 2016

### Item 10

**Title of Paper:**

Patient-Led Assessments of the Care Environment (PLACE)

**Presented By:**

Helen Payne Director of Facilities Management

**Action Required:**

**For Information**

**For Ratification**

**For a decision**

**For Feedback**

**Vote required**

**For Receipt**

To which duty does this refer:

Holding non-executive directors individually and collectively to account for the performance of the Board	x
Appointment, removal and deciding the terms of office of the Chair and non-executive directors	
Determining the remuneration of the Chair and non-executive directors	
Appointing or removing the trust's auditor	
Approving or not the appointment of the trust's chief executive	
Receiving the annual report and accounts and auditor's report	
Representing the interests of members and the public	x
Approving or not increases to non-NHS income of more than 5% of total income	
Approving or not acquisitions, mergers, separations and dissolutions	
Jointly approving changes to the trust's constitution with the Board	
Expressing a view on the Trust's forward plans	
Consideration on the use of income from the provision of goods and services from sources other than the NHS in England	
Monitoring the activities of the Trust to ensure that they are being conducted in a manner consistent with its terms of authorisation and the constitution.	
Monitoring the Trust's performance against its targets and strategic aims	x

#### How does this item support the functioning of the Council of Governors?

It is a requirement for all Trusts to produce an agreed high level action plan to address issues identified during the PLACE assessment process and a suggested plan is attached for ratification. This report demonstrates to Governors how the Trust is addressing its responsibilities.

**Author of Report:**

Helen Payne

**Designation of Author:**

Director of Facilities Management

**Date:**

1<sup>st</sup> November 2016

## SUMMARY REPORT

**Report to:** Council of Governors

**Date:** 24<sup>th</sup> November 2016

**Subject:** PLACE (Patient Led Assessment of the Care Environment) Outcome Report 2016

**From:** Helen Payne, Director of Facilities Management

**Prepared by:** Janet Mason, Hotel Services Manager  
Helen Payne, Director of Facilities Management

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### 1. Purpose

This briefing paper provides information and comment on the 2016 PLACE (Patient Led Assessment of the Care Environment) programme and the outcome information published by the NHS Health and Social Care Information Centre (HSCIC) during August 2016. The national outcome report is available in the public domain and shows the results for SHSC alongside PLACE outcome reports from other NHS Foundation Trusts and other organisations. These outcome reports may also be taken into consideration by the CQC when planning their inspection programme and assessing the Trust for compliance.

Thanks are due to Hotel Services Manager, Janet Mason, for her management and co-ordination of the PLACE assessments for the Trust and input to the report.

### 2. Summary

The following information table shows the outcome results from this year's assessment:

**PLACE Results for the 2016 assessment published August 2016**

Site	Cleanliness	Food Overall	Organisational Food	Ward Food	Privacy Dignity & Wellbeing	Condition, Appearance & Maintenance	Dementia	Disabilities (new for 2016)
	%	%	%	%	%	%	%	%
Firshill Rise (ISS)	98.67	91.14	83.33	99.52	94.44	98.16	N/A	90.47
Forest Close (excluded for 2016 due to refurbishment programme on site)								
Forest Lodge	100.00	89.01	83.08	96.94	92.71	97.18	N/A	86.71
Grenoside Grange	100.00	89.27	85.39	94.56	87.80	100.00	96.96	97.04
Longley Centre	99.56	89.69	81.93	94.60	88.25	95.81	N/A	71.40
Longley Meadows (Rivermead)	100.00	89.13	82.96	96.02	86.67	97.10	N/A	93.72
Michael Carlisle Centre	98.67	95.53	85.39	99.33	84.98	95.27	92.76	82.18
<b>SHSC Average</b>	<b>99.48</b>	<b>90.63</b>	<b>83.68</b>	<b>96.83</b>	<b>89.14</b>	<b>97.25</b>	<b>94.86</b>	<b>86.92</b>
National Average (all Trusts)	98.1	88.2	87.0	89.0	84.2	93.4	75.3	78.8
National Average (Mental Health & Learning Disabilities Trusts)	97.8	89.7	86.6	91.9	89.7	94.5	82.9	84.5
National Average North of England Commissioning Region (all Trusts)	98.5	88.5	87.2	89.4	86.1	94.4	74.3	79.2

The above table has been RAG rated to indicate where SHSC is at or above the national average in its outcome scores (Green) or slightly below (Amber). Although we do have a number of Amber rated scores most are not statistically significant, and are commented upon in the body of the report. It is extremely pleasing to note we have **four** scores of 100% which are denoted in Blue (in 2015 we had one which was also for cleanliness at Grenoside Grange)

There were once again methodological changes to the PLACE assessments between 2015 and 2016. These are outlined in the attachment “PLACE 2016 - Schedule of Proposed Changes” which was issued nationally. The changes are linked to external drivers e.g. public opinion; increasing emphasis on care standards for people with dementia; input from professional associations e.g. Hefma (Healthcare Estates & Facilities Managers Association); national changes that have taken place and comments and feedback from assessors during 2015. All of these have informed the format of the 2016 assessment round. In 2016 there were many minor changes; the main changes may be described as:

- In the mental health/learning disabilities ward assessment the cleanliness grid has been reduced from a maximum of 15 to a maximum of 7. Only the first 3 (bedrooms, toilets and bathrooms) will be mandatory with the others (treatment areas, social and communal areas, activity areas and self-care areas) being optional
- All condition, appearance and maintenance scorecards have been amended to increase the areas to match those for the cleanliness grids in the relevant area. This will make it easier to assess both aspects at the same time
- A sixth PLACE domain of disability will be introduced. This will use existing questions (as amended for 2016)
- In the Dementia Domain two questions about flooring were changed and merged into one to reduce confusion and inconsistency. The revised question is:
  - Is the flooring consistent, matt, non-reflective and non-patterned

For statistical interest, also attached to this report is the formal **HSCIC PLACE report** published in August 2016 (**See first PDF attachment**). This provides the full range of statistical information related to all PLACE outcomes nationally for the 2016 round of assessments which took place between March and May.

### Disabilities Domain

Please note the Disabilities Domain is new for 2016 so no comparisons can be drawn. This domain considers how premises are equipped to meet the needs of people with disabilities. The results collected do not represent a comprehensive assessment relating to disability but rather are based on a limited range of aspects with strong environmental or buildings associated components.

The assessment focuses on issues of access including wheelchair, mobility (e.g. handrails), signage and provision of things such as visual/audible appointment alert systems, hearing loops, and aspects relating to food and food service. It shares many facets with the dementia assessment, and with very few exceptions draws on existing aspects of the assessment rather than introducing new additional questions. This ‘double’ counting allows better use of data and avoids imposing additional burdens on data providers. The items included in the assessment do not constitute the full range of issues, rather focusing on a limited range with strong buildings/environment related aspects.

*(Explanation drawn from the PLACE 2016 publication document)*

## **2.1 Outcomes**

The PLACE assessments consider 6 key areas:

- Cleanliness
- Condition, Appearance & Maintenance

- Privacy, Dignity & Wellbeing
- Food and Hydration – further split into Food Overall; Organisational Food and Ward Food
- Dementia
- Disabilities

At the end of the process, each unit which has undertaken an assessment is given a result against these assessment areas.

Participating organisations and others who may use the data will be able to benchmark their performance or the performance of particular types of organisations. For the purposes of comparison, a national average of scores from all participating hospitals/units is calculated. This average is weighted to take account of the fact that hospitals vary in size and that in larger hospitals not all areas are assessed. The weighting factor used in this calculation is bed numbers. Bed numbers are used since they are common to all organisations, whereas some premises in which assessments are undertaken do not have wards e.g. certain mental health/learning disabilities units and Treatment Centres.

This is the fourth year PLACE assessments have been undertaken, so it is possible to use the outcomes as a historical measure of change.

Looking at the results across the Trust and against the National averages gives a snapshot indication for measuring against the individual domains. This should be used as an indication of where improvements and investments are needed. In particular, when we compare these outcomes to what we already know they become a useful measure and provide assurance, e.g. when the areas with a lower percentage score match up with the current planning and priority areas within the Trust. In addition where outcome results show a lower percentage score yet we currently do not have any plans for that area, there is an opportunity to review current assumptions to make sure we have not missed anything.

**(i) Cleanliness**

The standard of cleanliness was once again extremely good and general levels of cleanliness were relatively consistent.

As would be expected given the excellent results for this domain, issues were minor in nature only, including a few ceiling tiles and curtains stained by beverage or food residues; dusty ventilation grilles in some areas, and one laundry room with a very dusty floor.

These will be picked up at Senior Housekeepers meeting by the Hotel Services Manager. The scores either broadly consistent with, or have improved since, 2015.

It is important to note we have recorded 3 scores of 100% in this domain in 2016 and Grenoside Grange have retained their performance at 100%. *These are excellent outcomes and the housekeeping staff at these units are to be congratulated on their hard work.*

Unit	2015 Score	2016 Score
Firshill Rise	99.01%	98.67%
Forest Close	97.47%	N/A
Forest Lodge	99.86%	100.00%

Unit	2015 Score	2016 Score
Grenoside Grange	100.00%	100.00%
Longley Centre	98.73%	99.56%
Longley Meadows	99.25%	100.00%
Michael Carlisle Centre	99.47%	98.67%

We should also note these outcomes are due in no small measure to the work undertaken via the Senior Housekeepers Meeting, chaired by the Hotel Services Manager, which aims to improve standards and consistency of approach across the Trust. Our challenge once again is to maintain these very good scores while attending to the minor problems that have been identified.

**(ii) Condition, Appearance and Maintenance**

For the 2016 assessment round there were a range of changes to this domain to support consistency of assessment with the Cleanliness domain. This makes it impossible to make a direct comparison with 2015, and some aspects have migrated into the new Disabilities Domain, although the overall emphasis (indicated by the domain title) remains the same.

Notwithstanding, we have scored our first 100% outcome in this domain, for Grenoside Grange.

We should also note all scores have improved since 2015.

Our maintenance teams are largely responsible for this aspect of premises care so thanks are due to them for their hard work particularly at Grenoside which has enabled this outcome.

A comparison table is provided below:

Unit	2015 Score	2016 Score
Firshill Rise	92.75%	98.16%
Forest Close	97.92%	N/A
Forest Lodge	95.45%	97.18%
Grenoside Grange	98.57%	100.00%
Longley Centre	90.63%	95.81%
Longley Meadows	93.75%	97.10%
Michael Carlisle Centre	95.11%	95.27%

This year the areas highlighted in the PLACE assessment as requiring attention included:

- Minor damage to bedroom floor coverings; water damage to ceiling tiles; some paintwork in bedroom areas flaking/damaged
- Some bedroom furniture looking worn; some staining on chairs/settees and some loose fitting covers on upholstery needing replacements
- Some bed linen appearing faded/worn (but not damaged)

Where these issues relate to units where we expect to be in occupation for a reasonable period of time, consideration will be given to addressing via the Trust's existing PLACE revenue budget. We should note that a number will be picked up as part of the Trust's Longley Centre

Phase 2 capital development and we should not be looking to “double spend” on minor issues that will be addressed by a major capital scheme within the next 2 – 3 years.

**(iii) Privacy, Dignity & Wellbeing**

Minor changes were made to the assessment methodology for this domain; but it is broadly comparable with 2015. However some of the minor changes have resulted in a slightly lower outcome score this year for the Trust.

A comparison table is provided below:

Unit	2015 Score	2016 Score
Firshill Rise	94.70%	94.44%
Forest Close	95.15%	N/A
Forest Lodge	95.10%	92.71%
Grenoside Grange	89.53%	87.80%
Longley Centre	91.59%	88.25%
Longley Meadows	89.29%	86.67%
Michael Carlisle Centre	95.48%	84.98%

Some questions remain biased towards acute care providers, which is disappointing as we have raised concerns about this with HSCIC on several occasions.

An example of this is “Is anti-bacterial hand rub available at the bedside?”. Not only is this not appropriate for most of our inpatient units, in some areas it actually presents a risk as service users may attempt to use the contents for other purposes.

Another example of a change to questions which has disadvantaged the Trust is (for outpatient areas) “can patients/family leave consulting rooms without having to return through the general waiting area?”. In the majority of our services e.g. SAANS; Perinatal Mental Health – the building design does not enable this to happen.

Nonetheless we will review some aspects of this domain to see what simple changes might be achievable at low cost to improve patient experience and outcome scores.

**(iv) Food and Hydration**

The PLACE assessment gives food its own section as well as asking wider organisational questions and puts a requirement on the assessment team to not only look at the food but to sample it as well.

Once again the outcome shows that while we have a diverse spread of inpatient environments, the quality of the food remains at a high standard across the whole Trust. This is reflected in the Trust score being above the national average across the all sites. The scores suggest the Trust’s Nutritional Strategy approach has a positive impact on this aspect of the care environment.

This Domain is spilt into 3 separate scoring elements.

Comparison tables are provided below:

### Food Overall

Unit	2015 Score	2016 Score
Firshill Rise	90.78%	91.14%
Forest Close	94.19%	N/A
Forest Lodge	92.26%	89.01%
Grenoside Grange	93.59%	89.27%
Longley Centre	93.70%	89.69%
Longley Meadows	91.95%	89.13%
Michael Carlisle Centre	93.39%	89.27%

### Organisational Food

Unit	2015 Score	2016 Score
Firshill Rise	83.81%	83.33%
Forest Close	86.82%	N/A
Forest Lodge	88.12%	83.08%
Grenoside Grange	88.53%	85.39%
Longley Centre	86.78%	81.93%
Longley Meadows	85.45%	82.96%
Michael Carlisle Centre	88.81%	85.39%

### Ward Food

Unit	2015 Score	2016 Score
Firshill Rise	97.37%	99.52%
Forest Close	95.86%	N/A
Forest Lodge	96.89%	96.94%
Grenoside Grange	98.37%	94.56%
Longley Centre	95.28%	94.60%
Longley Meadows	99.22%	96.02%
Michael Carlisle Centre	94.90%	99.33%

These very good scores reflect the ongoing work of the Trust's Dietician and Assistant who engage with staff at all our sites where food is provided for service users, with the aim of ensuring a high quality, nutritionally balanced and healthy diet is available.

In respect of the **Organisational Food** scores we are aware these are slightly under the national average. The range of questions asked by PLACE for this element is shown in the **attached second PDF**.

We have considered how we may improve our scores for *Organisational Food* so that we attain at least the national average in future. This is a complex assessment area and in addition to the range of questions it poses, the **scoring methodology** is also complicated, as shown in the **attached third PDF**.

At the beginning there is a question about assessment of food procurement and catering services against the Government Buying Standards for Food and Catering Services. The Trust has not yet commenced this assessment but it has been discussed between the Director of Facilities Management and Interim Head of Procurement; and forms part of the Procurement



Strategy and also the revised Nutritional Strategy. Further work towards assessment will be done once the Trust's new Head of Procurement is in post later in 2016.

We have also assessed and are actively working towards compliance, in relation to the 10 Key BAPEN standards and the British Dietetic Association's Nutrition and Hydration Digest. These standards form part of the Trust's revised Nutrition Strategy and supporting Operational Policy which will be agreed upon and implementation commenced a little later in 2016 (although it may take a while to work through to full compliance).

Similarly at the moment our overall MUST screening percentage stands at 75%, but if we can improve this to 80+% we move into the next highest outcome score category. There is an aim in the Nutrition Strategy and Operational Policy to achieve a 100% screening within a 48 hour period following admission. This type of action will be picked up via the new Nutritional Steering Group.

We plan to look at achieving greater Trust-wide consistency for some of the *Organisational Food* assessment criteria. These include ensuring all units offer 3 choices at both lunch and dinner service (currently some offer 2); ensuring all units offer at least 4 spreads or preserves at breakfast (some offer 3); ensuring all units provide napkins (the majority do but there are a couple of reluctant adopters!).

We will also work with the Trust Communications Lead, Jane Harris, to consider the feasibility of providing menus in other languages or formats.

Lastly we should note that as we progress delivery of capital development schemes it is standard practice to incorporate plumbed in chilled water dispensers (for example there is one on Endcliffe Ward (PICU)).

#### **(v) Dementia**

This is the second year this domain has been assessed. It does not apply to units that will never knowingly admit a service user with dementia. Thus the only sites to which it applies in the Trust are Michael Carlisle Centre (in respect of Dovedale Ward – although this is not a dementia care ward primarily) and Grenoside Grange (G1 Ward).

Our outcome scores are:

<b>Unit</b>	<b>2015 Score</b>	<b>2016 Score</b>
Grenoside Grange	97.07%	96.96%
Michael Carlisle Centre	94.35%	92.76%

It forms part of the Ward assessment criteria. Questions are asked relating to the nature of the floor covering; toilets and toilet signage and general signage. Some additional questions are asked about avoidance of strong patterns in e.g. furnishings or curtains; marking of exit doors but 'disguising' of staff only areas by painting schemes, and covering or removal of mirrors. The criteria are based on best practice as advised by The Kings Funds and Stirling University.

Although we have scored well the scores are slightly reduced scores from 2015. We interrogated our outcomes to attempt to ascertain why this might be.

It was clear all buildings related requirements were being met without exception. There are some other questions related to this Domain. One question asks if there are facilities for family/carers to stay overnight. Dovedale Ward confirmed this would not be appropriate as they are an assessment and treatment ward primarily for older adults with acute mental health issues (but of course some service users may also have dementia); G1 Ward advised that in the event a service user was gravely ill they made provision for stays at the bedside. Another question asks if family/carers can access meals/snacks at all times of the day or night. We do not routinely make provision for this although of course the wards may offer refreshments at their discretion, and as already indicated we do not normally have family/carers on the wards at all times of the day or night.

These questions are aimed at Acute Trusts to ensure they improve their dementia care provision; nonetheless our outcome scores will have reduced slightly based on our responses to these questions.

**(vi) Disabilities**

This is a new Domain for 2016. It is not intended to be a comprehensive assessment of provision for service users with disabilities, but rather concentrates upon on how premises are equipped to meet the needs to people with disabilities based on a limited range of aspects with strong environmental or buildings components

Our outcome scores are:

<b>Unit</b>	<b>2016 Score</b>
Firshill Rise	90.47%
Forest Close	N/A
Forest Lodge	86.71%
Grenoside Grange	97.04%
Longley Centre	71.40%
Longley Meadows	93.72%
Michael Carlisle Centre	82.18%

Clearly we have an outlier score at the Longley Centre; otherwise all scores are above the national average.

There are a number of reasons for this including not having hand rails in corridors; the disabled access ramp to the current front entrance not having a slip resistant surface; not having a sufficiently mixed type of seating in reception or ward social areas (it is recommended to include a mix of different heights; with and without arms; and some bariatric); not having lift control buttons including braille, and no hearing loop at reception.

Bearing in mind we are about to commence a major capital refurbishment project for this site and there is currently only one ward (Maple) and the Memory Service occupying the un-refurbished parts of the site, we suggest the best course of action is to ensure the PLACE standards and requirements are made available to the Design Team at the very beginning of this process, so we can be confident details become incorporated into the design proposals and hence into the build/commissioning phase of the project. We can then be assured we have used our best efforts to ensure this aspect of service user care standards are built into our new service accommodation.

Meanwhile Longley Centre may continue to record a relatively low (although by no means poor) score for this domain.

## **2.2 Conclusion**

This is the fourth year the PLACE assessment programme has run nationally, and it gives us a good benchmark for future years. It is beneficial to compare the percentage scores across the Trust, and with the national average.

We have continued to carry out the assessments with smaller teams which are less intrusive for the service users. Each team had a ratio of 50% patient assessors and 50% staff which was deemed more effective for the patient assessors who in the post-assessment evaluation meeting stated they felt they were more involved and the assessment was thorough.

We are pleased to report the continuing involvement of Sheffield Healthwatch and service user Governors who have participated in the assessments.

The scores this year have mainly continued to improve overall and all staff involved in delivery of services which contribute to these scores are deserving of thanks for their efforts.

We should continue to challenge ourselves to maintain or improve on these scores where possible.

## **3. Next Steps**

The Trust's PLACE outcomes have been published in the public domain by the NHS Health and Social Care Information Centre alongside the outcome percentages for all other NHS organisations.

Copies of the outcome results will be made available for each area electronically and the synopsis (temperature chart) reports shared with ward and service managers. It is now much easier (following feedback to the HSCIC) to provide ward level feedback and this will be coordinated via the Hotel Services Manager.

We have also been asked to provide relevant information to Directorates (including senior management teams) as part of changes to our governance processes, particularly related to care standards.

In addition to the publication of the National Outcome reports there is a requirement for each Trust to make available for publication an Action Plan that outlines actions to address issues raised within the PLACE assessment. This can be a brief stand alone document or as a documented part of a wider Trust plan that is itself available within the public domain.

A proposed high level action plan is attached for consideration/ratification (having been previously endorsed by EDG at its meeting on 15<sup>th</sup> September 2016).

Following ratification the Director of Facilities Management will commence implementation of the plan.

## **4. Required Actions**

The Council is asked to receive this report.

## **5. Contact Details**

For further information, please contact:  
Helen Payne, Director of Facilities Management  
Email: [helen.payne@shsc.nhs.uk](mailto:helen.payne@shsc.nhs.uk)  
Tel: 0114 2718697

## **Attachments**

1. HSCIC PLACE Report for 2016
2. Organisational Food Questions
3. Results Calculation for 2016
4. High Level Action Plan

Sheffield Health & Social Care NHS FT – Patient Led Assessment of Care Environment (PLACE) Action Plan from 2016 Assessment Outcomes

Domain	Actions	Lead	Timescale	Resource Implications
Cleanliness	1. Discuss via Senior Housekeepers meeting the need to manage the following minor items identified during the assessments: <ul style="list-style-type: none"> <li>• Ceiling tile stains</li> <li>• Curtain stains</li> <li>• 1 no. laundry room – very dusty floor</li> <li>• Dusting of ventilation grilles</li> </ul>	Hotel Services Manager	November 2016	No additional requirements
	2. Ensure housekeeping teams continue to concentrate on delivering the excellent cleanliness standards found at assessment in 2016	Hotel Services Manager	Ongoing	No additional requirements
Condition, Appearance & Maintenance	Obtain costs for items identified in the PLACE assessments (unless these relate to areas which will be addressed via the Longley Centre Phase 2 Capital Plan) and plan for these to be actioned via the PLACE revenue budget allocation <ul style="list-style-type: none"> <li>• Damage to bedroom floor coverings; damaged paintwork in bedroom areas; water damage to ceiling tiles</li> <li>• Staining on chairs/settees; some bedroom furniture worn; replace loose furniture covers</li> </ul>	Hotel Services Manager & Head of Capital Development	January 2017	Existing allocation

Domain	Actions	Lead	Timescale	Resource Implications
Privacy, Dignity & Wellbeing	Review domain assessment questions and identify where there are simple/low cost solutions that could enhance the care experience and also improve the Trust's outcome scores e.g. privacy curtains in some bathrooms; improved storage for personal possessions	Hotel Services Manager & Director of Facilities Management	January 2017	Existing allocation
Food & Hydration	<p>1. Concentrate on the Organisational Food element and assess feasibility of making simple/low cost changes to improve the care experience and also improve the Trust's outcome scores e.g.</p> <ul style="list-style-type: none"> <li>• Consistency of number of options offered at lunch and dinner services (should be 3)</li> <li>• Consistency of choice of spreads/preserves offered by all units (should be 4)</li> <li>• Ensure <i>all</i> units offer napkins with the meal service</li> <li>• Review with Trust Communications Lead the feasibility of introducing menus in different languages and formats</li> </ul> <p>2. Continue the work to implement a revised Nutritional Strategy and Operational Policy via the Nutritional Steering Group. To include consideration via the Head of</p>	<p>Hotel Services Manager</p> <p>Hotel Services Manager; Director of Facilities Management; Trust Communications Lead</p> <p>Director of Care</p>	<p>January 2017</p> <p>December 2016</p> <p>Ongoing</p>	<p>May be some cost implication on ward food budgets</p> <p>Resource implications not yet assessed</p> <p>Resource implications not yet assessed</p>

Domain	Actions	Lead	Timescale	Resource Implications
	Procurement of assessment against the Defra Government buying standards for Food and Catering Services	Standards; Director of Facilities Management; Head of Procurement		
Dementia	No specific actions required			
Disabilities	Review assessment questions/outcomes and identify any simple/low cost actions which will enhance the care experience and also improve the Trust's outcome scores (apart from the Longley Centre main building)	Hotel Services Manager; Director of Facilities Management	November 2016	Existing allocation

**September 2016**