Side by Side

St Columba’s Hospice Participation Strategy

Working Together to Deliver Excellence

Date: February 2015
Review Date: March 2016
Authors: Vicky Hill and Dot Partington
**Standards and Policy**

The following documents have been considered in the development of Side by Side:

<table>
<thead>
<tr>
<th>National Guidance And Standards</th>
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<tbody>
<tr>
<td>Patient Rights (Scotland) Act 2011</td>
<td>Health Care</td>
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<tr>
<td>CEL 4 (2010) Informing, Engaging and Consulting People in Developing Health and Community Care Services</td>
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<tr>
<td>Scottish Health Council (2014) The Participation Toolkit Supporting Patient Focus and Public Involvement in NHS Scotland</td>
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<tr>
<td>National Care Standards for Hospice Care (2005)</td>
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<td>NHS Scotland Participation Standard (2010)</td>
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<td>NHS QIS Clinical Governance Standards (2005)</td>
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<tr>
<th>Hospice Policies</th>
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<td>Advocacy Policy</td>
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<td>Complaints Procedure</td>
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<td>Management of Patient and Carer Comments</td>
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<td>Media Policy</td>
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<tr>
<td>Use of Social Media- Advice and Guidance for Staff</td>
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<tr>
<th>Good Practice Examples</th>
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<tbody>
<tr>
<td>Prince and Princess of Wales Hospice (2014) Participation Strategy (version 4)</td>
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Thank you to Susan Austin and Jackie Weir (Scottish Health Council) for their information, support and guidance in the development of Side by Side.
**Introduction**

St Columba’s Hospice is committed to ensuring the delivery of high quality, person centred care. Our aim is to meet the needs and wishes of patients receiving care from all Hospice services. Involving patients, families, members of the public, staff and volunteers is an important part in continuing to improve the quality and development of the services we provide.

**Our Vision**

St Columba’s Hospice aims to promote a culture where participation from patients, families, members of the public, staff and volunteers forms part of day-to-day planning, developing and delivery of patient centred services. Side by Side - St Columba’s Hospice Participation Strategy - sets out how we will ensure that patients, families, the public, staff and volunteers will continue to have a voice. Systems and processes which support patient participation are outlined and provide a framework to support a consistent approach in continuing to embed patient participation activities within the development of all Hospice services. Participation from patients, families, the public and Hospice staff and volunteers will also help us to plan, develop and deliver our organisation-wide strategy over the next five years.

Side by Side strives to optimise the experience of patients and families, while supporting the delivery and achievement of the following standards and best practice statements:

“*Care and services are provided in partnership with patients, carers and the public, treating them with dignity and respect at all times, and taking into account individual needs, preferences and choices.*”

(NHS QIS Clinical Governance and Risk Management Standards 2005)

“You can be confident that the hospice will welcome your views on services, so that it can continuously improve the quality of its care. If you feel unable to voice your views; you will receive support from a representative of your choice.”

(National Care Standards for Hospices 2005)
“Mutually beneficial partnerships between patients, their families and those delivering healthcare services which respect individual needs and values and which demonstrate compassion, continuity, clear communication and shared decision-making.”

(NHS Scotland Quality Strategy 2013)

“Participation will only be meaningful and effective if ...... [it] recognises the diversity of Scotland’s people and supports and encourages all sections of society to get involved, whether as active partners in their own care or by engagement in wider discussions about services.”

(Scottish Health Council 2014)
**Key aims of Side by Side**

The aims of Side by Side are to:

- improve the patient experience by encouraging active participation in the planning and delivery of their care
- continue to improve the experiences of patients and their families
- provide feedback to people on decisions made and how their views have been taken into account
- keep users of the service informed and involved in developing and improving services
- continue to improve communication with patients, families and carers who use all Hospice services
- identify people who may be affected by proposed service developments or changes and provide information to support this change
- ensure effective action is taken to improve services
- ensure that all staff and volunteers in the organisation embed patient focus and patient involvement in their daily work
- ensure Hospice systems and processes support participation in the planning, development and delivery of services

**Definitions of Participation**

**Patient Focus**

Patient focus involves treating individuals with dignity and respect and providing services for patients that are responsive to age, disability, gender, religion or sexual orientation. Patient focus ensures that:

- Patients are encouraged through the use of care planning to be active partners in their care
- Information is available to help patients understand their treatment and care options
- People are treated with dignity and respect
- People who have caring responsibilities have access to information and support
- People are encouraged and supported to give their views, or to make a comment or complaint at any time
Public Involvement

Public involvement encompasses the participation of people in the planning, development and improvement of healthcare services. This engagement is encouraged from patients, families, the public, staff and volunteers via many Hospice initiatives. This also involves feedback systems to ensure that people know that their feedback has been taken in to account when decisions are made.

Corporate Governance of Participation

Robust governance arrangements are required for involving people, founded on mutuality, equality, diversity and human rights principles. Corporate governance of participation ensures the views of patients, families, the public, staff and volunteers are taken into account in the planning and delivery of healthcare. Every member of staff, and each Hospice volunteer, will be encouraged and supported to involve patients, families and the public.

Roles and Responsibilities

Everyone has roles and responsibilities in promoting and embedding participation in the day-to-day practice of the Hospice.

<table>
<thead>
<tr>
<th>Role</th>
<th>Responsibility</th>
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<tbody>
<tr>
<td><strong>Chief Executive Officer</strong></td>
<td>Has overall responsibility and is accountable for the experiences of patients using St Columba’s Hospice services. Chief Executive is accountable to the Board of Governors.</td>
</tr>
<tr>
<td><strong>Director of Clinical Services</strong></td>
<td>To ensure that all Heads of Department are fully aware of Side by Side and build on its principles for all aspects of service delivery and development. To ensure that all Heads of Department have the skills and knowledge to respond appropriately to feedback received.</td>
</tr>
<tr>
<td><strong>Heads of Department and other Senior Staff</strong></td>
<td>To ensure that staff in their teams are aware of the systems available for feedback to be provided and to promote their use. To build on the principles of Side by Side for all aspects of service delivery and development.</td>
</tr>
<tr>
<td><strong>All Staff and Volunteers</strong></td>
<td>All staff and volunteers are responsible for ensuring that their practice, behaviour and interactions with patients, families and the public support the principles of participation and strive to enhance and optimise the experience of using Hospice services.</td>
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What we do currently

As part of the development of Side by Side, a scoping exercise to identify current practice and to provide guidance for future development has been undertaken in relation to patient participation activities. This involved questionnaire feedback from patients, staff and volunteers (see Appendix 1). In addition, all Heads of Department have been asked to review current practices of patient, family and public participation within their departments (see Appendix 2) using participation tools as a guide. Evidence of engagement from patients, families, the public, staff and volunteers via many Hospice initiatives have been identified (e.g. clinical initiatives, fund raising appeals and work with schools). Some areas for development were identified and these will form the Side by Side Action Plan.

Participation Tools

Side by Side supports the use of the Participation Tool Kit (Scottish Health Council, 2014). The Participation Tool Kit provides a range of tools, guidance and resources for consideration by staff and volunteers working within the Hospice. These can be used to involve members of the public as a group, but also to involve individuals in their own care.

The participation tools can be grouped under the following headings:

<table>
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<tr>
<th>Inform</th>
<th>- giving information: exhibitions, leaflets, written documents</th>
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<tr>
<td>Engage</td>
<td>- getting information: questionnaires, surveys, focus groups, telephone interviews</td>
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<tr>
<td>Involve/Consult</td>
<td>- ongoing engagement and dialogue</td>
</tr>
<tr>
<td>Empower</td>
<td>- partnership working or co-production</td>
</tr>
<tr>
<td>Evaluate</td>
<td>- reviewing processes and outcomes to drive improvement</td>
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Seeking Feedback

Seeking feedback is central to service improvement and a key element in delivering this strategy. The Hospice recognises the importance of feedback from patients and their families in relation to their care experience and the positive impact this has in the development of future provision of care. The benefits of feedback include:

- Knowing about those using the service, which will help us understand their needs
- Raising awareness of how the service is experienced
- Improving communication between those who use services and those who provide services
- Opportunities to improve services from comments on what has worked well and learning from what has not worked well

St Columba’s Hospice is committed to continually collecting feedback relating to the experiences of patients, families, the public, staff and volunteers. This will support all groups within the Clinical Governance Structure in identifying quality improvements which are patient and family focused. There are various ways in which patients, carers, the public, staff and volunteers can give feedback which include:

- Suggestion Boxes situated in Reception, Cedar Ward, Pentland Ward and Day Hospice
- Complaints, Concerns, Comments and Suggestions
- Patient Questionnaires
- Face to Face opportunities through conversations with patients, families and public
- Service Evaluation Questionnaires

Listening to and Acting on Feedback

All feedback is reviewed by the Chief Executive Officer. Where contact details are supplied, the Chief Executive Officer will give feedback by:

- Feedback verbally by the Chief Executive Officer in person or by a nominated staff member
- Feedback in writing by the Chief Executive Officer in person or by a nominated staff member
Sharing and Learning from Feedback

The work of St Columba’s Hospice is supported by approximately 180 staff and 700 volunteers. The importance of timely feedback of the learning from the patient experience to patients, families, the public, staff and volunteers is vital. Systems are in place for reporting, monitoring and accountability for improvements. All feedback is used to improve safety and quality and will facilitate the development of practice and services.

What we want to achieve

Outcomes of Participation

The aims of Side by Side and the Clinical Governance Structure are closely aligned in identifying key areas that are crucial to enhancing the patient experience. These include:

- High quality person centred care at the end of life in a welcoming environment
- Effective communication and recording of care
- Care delivery that is safe and effective
- Identifying and mitigating risk
- Accessible up-to-date information to support and inform decision making
- Care and environment which promotes infection control practices
- Pain and symptom assessment and management that is consistent, safe and effective
- Developing and evaluating services
- Family focus
- Supporting continuous improvement

How we are going to achieve it

Our Action Plan

Our Side by Side Action Plan has been created by building on our current practice of participation, and communicates our future vision to enhance participation through co-production in the planning, development and delivery of Hospice services. Our Action Plan has been developed using patient focus, public involvement and corporate governance elements and outlines activity until the review of the strategy in March 2016.
# Action Plan

<table>
<thead>
<tr>
<th>Priority</th>
<th>Action</th>
<th>Timescale</th>
<th>Lead</th>
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<tbody>
<tr>
<td>Patient and Family Focus</td>
<td>Patients and families should have every opportunity to be involved within both their care decisions and management of their care. Review the current care planning system and the ‘Named Nurse’ role to ensure processes are patient centred. “Making it Easy” will be available to staff to encourage the use of techniques (e.g. teach back) to support patients and families’ understanding of care.</td>
<td>April 2015</td>
<td>Ward Managers</td>
</tr>
<tr>
<td>Feedback to comments and suggestions is to be shared more widely than the current verbal/written feedback to individuals by the Director of Clinical Services.</td>
<td>Feedback via a ‘You Said, We Did’ noticeboard will be created. This will be situated in the main reception, Day Hospice and inpatient wards. A monthly report capturing feedback from questionnaires, comments cards and letters will be available in the Iona Café, staff dining room, volunteer office and main reception. A copy of the full report will also be placed on the internal Hospice shared drive for all staff to access. Community Palliative Care Services will identify systems for patients and families to feedback.</td>
<td>March 2015</td>
<td>Director of Clinical Services</td>
</tr>
<tr>
<td>Patient and family involvement in the future planning and development of services.</td>
<td>Patients and families to be asked to participate in the development of the Hospice five year strategy.</td>
<td>December 2015</td>
<td>Chief Executive, Director of Clinical Services and Medical Director</td>
</tr>
<tr>
<td>Ensuring that all patients and families have the opportunity to participate in their care and/or development of services if they wish.</td>
<td>Review all information and methods of feedback to identify any potential barriers which may prevent patients, families and members of the public commenting on, or participating in, the development of Hospice services. Further actions will be taken from the findings of this review. Guidance for staff regarding Equality Impact Assessment should be developed.</td>
<td>December 2015</td>
<td>Director of Clinical Services and Chief Executive</td>
</tr>
<tr>
<td>Priority</td>
<td>Action</td>
<td>Timescale</td>
<td>Lead</td>
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<td>Public Involvement</td>
<td>Wider public and stakeholder involvement to ensure co-production and that development of services is in line with Lothian requirements.</td>
<td>December 2015</td>
<td>Chief Executive, Director of Clinical Services and Medical Director</td>
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<td></td>
<td>Stakeholder event will be held to support the planning and development of the five year Hospice strategy.</td>
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<td>Promoting wider public feedback.</td>
<td>Review use of e-participation methods (e.g. Twitter, Facebook etc.) Public feedback will be sought regarding the new website design.</td>
<td>July 2015</td>
<td>PR and Communications Manager</td>
</tr>
<tr>
<td>Health Promoting Palliative Care.</td>
<td>The Hospice will explore opportunities and create an action plan to embrace HPPC activities within the Hospice environment.</td>
<td>December 2015</td>
<td>Medical Director and Director of Education and Research</td>
</tr>
<tr>
<td>Corporate Governance</td>
<td>Policy development to support Side by Side.</td>
<td>March 2015</td>
<td>Director of Clinical Services and Chief Executive</td>
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<td></td>
<td>Review current Management of Comments policy and the Complaints Policy. Guidance will be available for staff regarding how to respond to and manage feedback.</td>
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<td></td>
<td>Review Clinical Governance Structure with participation embedded.</td>
<td>December 2015</td>
<td>Chief Executive, Director of Clinical Services and Medical Director</td>
</tr>
<tr>
<td></td>
<td>Side by Side to be reviewed by Heads of Department prior to roll-out to their departments. All staff are required to read Side by Side.</td>
<td>March 2015</td>
<td>Director of Clinical Services</td>
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<td></td>
<td>Drop in sessions for staff and volunteers to support understanding and engage ‘champions’.</td>
<td>April 2015</td>
<td>Clinical Governance Coordinator</td>
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<tr>
<td></td>
<td>Side by Side to be included in induction for all staff and volunteers.</td>
<td>June 2015</td>
<td>Director of Clinical Services/HR Manager</td>
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**Patient Participation within the Clinical Governance Structure**

The participation of patients, families, the public, staff and volunteers will be embedded within the planning, development and delivery of services and this will be supported within the Clinical Governance Framework.

Effective communications are an essential and integral part of delivering quality patient care. Communication with patients and families is a priority and this includes listening and talking to patients, their families, members of the public and the wider community.

**Education**

Heads of Department will be proactive in embedding the principles and practice of participation in the review and development of their services. They will ensure that their teams are aware of their roles and responsibilities in encouraging participation.

**How we will know if we have achieved it**

**Delivery and Evaluation**

An Annual Report detailing the results of participation activity from January 2015 - December 2015 will be produced identifying how feedback from patients, families, the public, staff and volunteers has contributed to the improvement and development of services. The Leads identified in the Action Plan will report on the actions, achievements and learning as part of the Annual Report. The results will be disseminated via the Clinical Governance Structure reporting systems.
**Conclusion**

Side by Side - St Columba’s Hospice Participation Strategy - provides a framework which sets out the direction for the next year with the aim of continuing to improve, develop and embed patient, family, public, staff and volunteer engagement and participation practices across all services. This strategy aims to support staff and volunteers in identifying a variety of opportunities to ensure the principles and practice of participation are integral to our day-to-day practices.

The Clinical Governance Structure will support the implementation of this strategy by identifying key areas which impact on the patient experience within all services delivered by the Hospice.

The successful implementation of Side by Side is dependent on the attitudes, beliefs, values, behaviours and assumptions shared by individuals within all teams working across all Hospice services. St Columba’s Hospice supports a positive culture of engagement and participation, which requires input from every individual at every level within the organisation.
Appendix 1

Questionnaire Results

**Patient Questionnaire: Five responses**

**Would you like to have a voice in St Columba’s Hospices future developments?**

We are creating a strategy to ensure we involve patients and their families in all that we do at St Columba’s Hospice. We would love to hear what you think about your experiences of using Hospice services and your ideas on how we can develop how we provide care in the future.

1. Our aim is to work in partnership with patients and their families to provide the best possible care. Do you feel involved in planning and making decisions about your care?
   
   Responses:
   
   “Yes”- 5  

2. Can you explain your answer?

   “Would like to be involved in decision making- but not feel pressured to conform”- 1
   “I have been able to talk through all my medical issues with relevant staff and received helpful advice and assistance”-1
   “Nurses speak to me every time I am in Day Hospice re any problems regarding illness”-1
   “Feel care needs are minimal at present. No complaints.” Feels that if a new problem-reassured that Day Hospice staff would assist. - 1
   “Great benefit from massage, physiotherapy and general communication from all staff. Happy to discuss any aspects of care with staff nurses.”-1

3. Do you have any suggestions as to how we could improve how we plan your care with you and your family?

   “No thoughts on this”- 1
   “I am aware that staff do consult family when this is relevant and this seems to be good practice”-1
   “No- feel care is first rate. Kind and generous care. Feel that there are no improvements needed.”-1
   “No thoughts on this”-1
   “No, happy”- 1

4. If you wanted to give us feedback on your experiences, thoughts or ideas - how would you best like to do it?

   “Through discussion with staff”-1
   “Written questionnaire is a good idea”-1
   “Talk to staff”- 1
   “Very happy with hospice provision at present”- 1
“Initially verbally...wish to write a thank you letter- very appreciative of care”- 1

5. Is there any feedback you would like give us now about your experiences or ideas?
   “Positive experience of care. Feel day services is a positive environment- good atmosphere. Benefits from the camaraderie-helps to share experiences with other people in the same situation and have a laugh”-1
   “First class service- my experience”- 1
   “Totally excellent care, overwhelmed by the great kindness by staff and volunteers. Takes your breath away. No ideas at present.”- 1
   “Very happy with care”-1
   “Feel all staff are very nice, caring and have my best interests at heart. Approachable if difficulties arise.”-1

6. We are very keen to involve patients and their families in the development of our services. Have you any suggestions of how you would like us to do that?
   “Feel that current service is absolutely amazing- would communicate any thoughts re development of SCH in speech or writing”-1
   “Telephone contact or personal interview when necessary”-1
   “Excellent caring arrangement. Happy to discuss ideas with staff.”-1
   “No”-1
   “Discussion with staff”-1

7. We are thinking of calling our Participation Strategy “Side by Side”- What do you think?
   “Like title”-1
   “More emphasis on collaboration between staff, volunteers and patients in the title of the strategy. Feel name suggests separation- should be more emphasis on togetherness”-1
   “An excellent concept”-1
   “Doesn’t sound right”-1
   “Very appropriate”-1

8. Do you have any other comments you would like to make?
   “Staff are fantastic. Much enjoyed Day Hospice Christmas Celebrations”-1
   “No- very contented with the present arrangements”-1
   “Nothing at present- content”-1
   “Very happy”-1
**Staff Questionnaires: Would you like to have a voice in St Columba’s Hospice future developments?**

We are creating a strategy to ensure we involve patients, families, staff and volunteers in all that we do at St Columba’s Hospice. We would love to hear what you think about your experiences of using hospice services and your ideas on how we can develop how we provide care in the future.

**Staff and Volunteer Questionnaires: 4 responses**

1. Our aim is to work in partnership with patients and their families to provide the best possible care. Do you feel we involve patients and families in planning and decision making about care?
   - **N/A-2**
   - **“Yes”- 1**
   - “I feel we do discuss care with our patients and if they would like us to speak with their family we often invite them in to meet with us and the patient” - 1

   Can you explain your answer?
   - “N/A. No clinical experience and knowledge of care plans so unable to answer” - 1
   - “I think there is enough information given in admission packs and leaflets provided in the hospice. Staff make patients and families aware that they can be approached about anything and there is back up (AHP)” - 1

2. Do you have any suggestions as to how we could improve how we plan care with patients and families?
   - **N/A- as above, although transparency open communication is key from Day 1, as is asking the right questions.”- 1**
   - **N/A-1**
   - “Involve patients and families in forums- face to face contact.” - 1
   - “Time to spend talking through options ensuring patients and families have good understanding of what we can offer and other support that they can access.” - 1

3. If you wanted to give us feedback on your experiences, thoughts or ideas - how would you best like to do it?
   - **“Via e-mail or online survey”- 1**
   - **“E-mail”- 1**
   - “Comments cards. Also when family resource room is up and running- possible drop in sessions to speak to a member of staff.” - 1
   - “Verbally. Reflection on good and bad previous experiences. A board where we could put notes- physical/electronic.” - 1
4. Is there any feedback you would like to give us now about your experiences or ideas?

“Improving internal communications important also if want staff to engage at all - difficult as many staff don’t use email. Separate feedback forms for patients and families would personalise it a little as currently a bit muddled. Keep it simple.” - 1

“No” - 1
Not answered - 1

“We get very good feedback from patients and families. For the future a drop in session for families, to be able to answer questions and support them. Look at services for younger people. Complementary therapies to be available for all” - 1

5. We are very keen to involve patients and their families in the development of our services. Have you any suggestions of how you would like us to do that?

“Feedback/complements and complaints section on the website and public consultations on strategy/service developments (separate forms for patients)” - 1

“Not really” - 1

“Again- set up forums- face to face sessions.” - 1

“Needs to be realistic- all very well to ask what people want but if we are then unable to deliver could have a negative impact.” - 1

6. We are thinking of calling our Participation Strategy “Side by Side” - What do you think?

“Seems to fit well- reinforces the idea of working with patients and families rather than staff focus.” - 1

“Sounds good” - 1

“Neither like or dislike” - 1

“Feel it doesn’t speak of Hospice. Sounds like 2 paths- no togetherness” - 1

7. Do you have any other comments you would like to make?

“Mixing strategic and operational topics in questionnaires would give a better idea of the little things that make a difference while giving people an opportunity to give their overall opinion on services and how they can be improved.” - 1

“Not at this time” - 1
Not answered - 1

“We need to remember the ethos of the hospice and our tag line ‘care and compassion’” - 1
Volunteers Questionnaires: Would you like to have a voice in St Columba’s Hospice future developments?

We are creating a strategy to ensure we involve patients, families, staff and volunteers in all that we do at St Columba’s Hospice. We would love to hear what you think about your experiences of using Hospice services and your ideas on how we can develop how we provide care in the future.

Volunteer Questionnaires: Five responses

1. Our aim is to work in partnership with patients and their families to provide the best possible care. Do you feel we involve patients and families in planning and decision making about care?
   “Yes”- 3
   “I am sure you do it as part of all feeling involved.”-1
   “In my role I deal with Day Hospice patients in the main, personal experience indicates good involvement.”-1
   Can you explain your answer?
   “I know of a number of people who have had hospice care.”-1
   “Yes- as a volunteer my direct involvement with the patients and their reaction to me and other volunteers is positive.”-1
   “Yes- as a volunteer in Day Hospice I feel that what we offer is of the highest standards in all ways.”-1
   “Yes- When my wife was a patient doctors and nurses always involved us in discussing options.”-1

2. Do you have any suggestions as to how we could improve how we plan care with patients and families?
   “Can’t think of anything really!”-1
   “none come to mind”-1
   “no, as everything possible is dealt with”-1
   “no further suggestions”-1
   “Perhaps a more specific point of contact. I did not think the named nurse actually happened.”-1

3. If you wanted to give us feedback on your experiences, thoughts or ideas - how would you best like to do it?
   “Discussion”-1
   “Discussion forum”-1
   “By personal contact with Jackie Husband, the hospice director.”-1
   “Face to face with those responsible”-1
   “Perhaps talking to someone on a one to one basis.”-1
4. Is there any feedback you would like to give us now about your experiences or ideas?

“At times more help would be appreciated but”-1
“Recent experience is of less opportunity to meet Hospice staff unless through Day Hospice”-1
“Not usually”-1
“Not particularly”-1
“I feel my wife received the best possible care. As a volunteer I am happy to give something back.”-1

5. We are very keen to involve patients and their families in the development of our services. Have you any suggestions of how you would like us to do that?

“Newsletter and/or hold meetings with them”-1
“Difficult to make suggestions- I’m sure you have your own thoughts.”-1
“I feel it happens anyway”-1
Not answered-2

6. We are thinking of calling our Participation Strategy “Side by Side”- What do you think?

“Sounds appropriate”-1
“I think actions are more important than labels.”-1
“OK”-1
Not answered-1
“Yes- sounds good”-1

7. Do you have any other comments you would like to make?

Not answered-2

“As a Day Hospice Volunteer I speak purely from my experiences here and not other areas of the hospice.”-1

“As I am in DH, I feel only able to comment on my particular area and not on the ward areas.”-1

“I think the hospice is a fantastic place, giving incredibly good service at a difficult time for families.”-1
### Appendix 2: Examples of Participation at St Columba’s Hospice - December 2014

<table>
<thead>
<tr>
<th>Participation Tool</th>
<th>Inform</th>
<th>Engage</th>
<th>Involve/Consult</th>
<th>Empower</th>
<th>Evaluate</th>
<th>Examples</th>
</tr>
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</table>
| Comments Cards                      | ✓      |        |                 |         | ✓        | Freely available comments cards to pick up throughout the hospice
Review of thank you letters                                                                                                           |
| Patient stories                     | ✓      | ✓      |                 |         |          | Sharing Patient stories with the media                                                                                                   |
| Display and exhibitions             | ✓      | ✓      |                 |         | ✓        | To absent friends
Doors Open Day
Art exhibition in Education Building                                                                                                   |
| Questionnaires                      | ✓      | ✓      |                 |         | ✓        | Bereavement Satisfaction Questionnaire                                                                                                   |
|                                     | ✓      | ✓      | ✓               |         |          | Patient Satisfaction Questionnaire                                                                                                         |
|                                     | ✓      | ✓      | ✓               |         |          | New Build Questionnaire                                                                                                                    |
|                                     | ✓      | ✓      | ✓               |         |          | End of Life Care Plan Consultation- development                                                                                           |
|                                     | ✓      | ✓      | ✓               |         |          | Catering Questionnaire and comments                                                                                                      |
| Focus Groups                        | ✓      | ✓      | ✓               |         | ✓        | Art Strategy Focus Group                                                                                                                   |
|                                     |        |        |                 |         |          | Hospice Logo                                                                                                                             |
| Presentations, Group talks and tours| ✓      | ✓      |                 |         | ✓        | Talks by Fundraising department
Schools talks and visits                                                                                                                  |
| Public Meetings                     | ✓      | ✓      |                 |         |          | Annual General meeting                                                                                                                   |
| Teach Back                          | ✓      | ✓      |                 |         |          | Medicines management teaching on discharge                                                                                               |
| Written Information                 | ✓      |        |                 |         | ✓        | Variety of information available (e.g. leaflets and Pause for Thought)                                                                 |
| Management of complaints            |        |        |                 |         |          |                                                                                                                                           |
| Medical Revalidation Questionnaires | ✓      |        |                 |         | ✓        |                                                                                                                                           |
| Management Walk round feedback      |        |        |                 |         | ✓        | Email marketing, website, fundraising website, Twitter, Facebook, You Tube, Survey Monkey, Mailchimp                                     |
| E-participation                     | ✓      |        |                 |         | ✓        | Newspaper advertising, magazines, press releases                                                                                          |
| Media                               | ✓      |        |                 |         |          | Leaflet, posters, newsletter                                                                                                              |
| Letters and Mailings from Fundraising| ✓    | ✓      |                 |         |          | High Street presence- advocacy role for the Hospice                                                                                       |
| Hospice Shops                       | ✓      | ✓      |                 |         |          | Stand Up for St Columba’s, Burns Supper, Celtic Challenge, The Push, A Walk to Remember, Giant Pub Quiz,
| Fundraising Events and Appeals      | ✓      | ✓      |                 |         |          |                                                                                                                                           |
| Education                           | ✓      |        |                 |         |          | Module content- Session on Public Engagement in Shadows and Horizons module (MSc Programme).
Use of participation projects in teaching (e.g. Voices survey)                                                                                                                                         |
|                                     | ✓      | ✓      | ✓               |         |          | Information for students- QMU prospectus, Hospice website, flyers, handbooks, student narratives                                           |
|                                     | ✓      | ✓      | ✓               |         |          | Feedback from students- evaluations, Student-staff consultative committee                                                               |
|                                     | ✓      | ✓      | ✓               |         | ✓        | Student, graduate and manager membership on programme review and validation groups. Market research for new programmes.             |