
Commissioning for patient experience

Designing non-emergency patient transport service in Leicester, Leicestershire and Rutland

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Patients, Practices, Partners

Focus commissioning question

What needs to happen so that eligible patients in Leicester, Leicestershire and Rutland get effective, safe, appropriate and timely non-emergency transport services?



Co-design: what we did

Captured the experience of:

People who use transport (n = 43)

Family carers and escorts (n = 11)

Drivers (n = 18)

**Frontline staff: NHS staff (n = 16), PTS
staff (n = 5)**



Analysis – what we did

- Themed qualitative data
 - Created emotional maps
 - Translated insights into high impact actions
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- Presented business intelligence to stakeholders at public, contract and market events
 - Taken additional learning from events
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- Shared business intelligence with project group
 - Worked with project group and embedded business intelligence as a golden theme through business case and specification



How we engaged



1-2-1 intensive interviews with patients, carers, drivers, planning/control room staff, health care professionals in setting of care



**Planning Alternative Tomorrows (PATH) event
Market event
Provider event – community and acute**

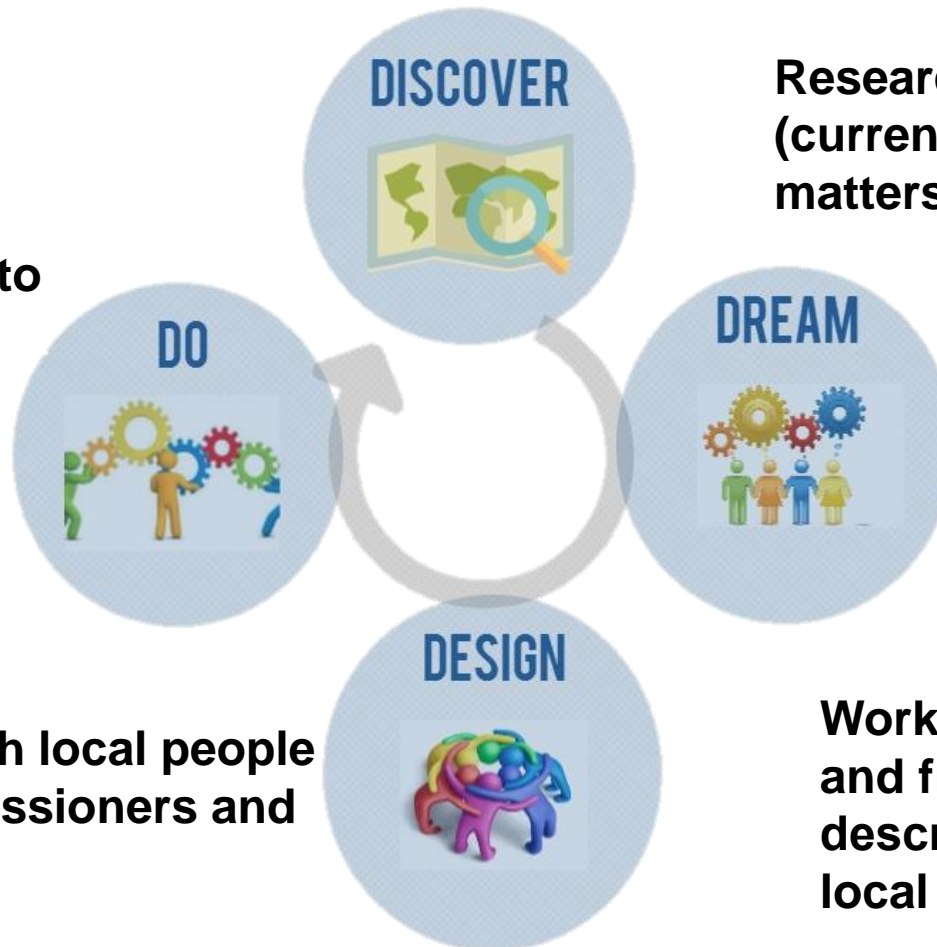


Methodology – Experience Led Commissioning

Georgina Craig Associates

Experience Led Commissioning

Embed into
contracts



Research with local patients
(current situation and what
matters most)

Co-designed with local people
and local commissioners and
providers

Work with families
and frontline teams to
describe 'good' in
local pathway



What made the difference?



Engagement and experience team involved from the start and member of a strong project group



Relationships developed through co-design



Shared learning acted or being acted on



Insights integral to business case and specification



Changed the conversation and the language

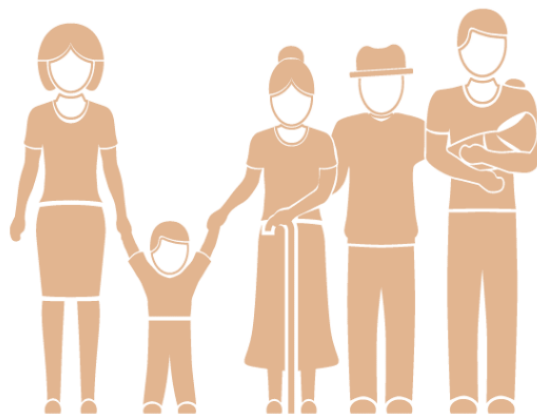
Our work here is not done!



**Embed our business intelligence
into the transport provider contract**



**Work with providers across the health
economy to ensure that mobilisation is
patient-centred**



**Support relationship building
across all providers, patients,
carers and stakeholders to
ensure that people are working
together to provide a patient
centred service**

Thank you

Questions

