#### **Keeping You In The Loop**

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YOU IN THE LOOP

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#### Rationale – why did we want to improve communication and continuity of care?



Some patients and carers were telling us they didn't feel they had enough information about their care:

> "More feedback could be supplied to the patient to keep him/her up to speed with progress and to keep them "in the loop" and limit the stress of feeling abandoned and not part of the process."

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#### Rationale – cont'd



Your Views Matter (Trust internal survey) results 2017:

- 96% say communication and information is 'mainly good'
- 97% say discharge is 'mainly good' However, other data tells us we could improve

Complaints figures 2017:

- 87 regarding communication
- 46 regarding discharge Concerns figures 2017:
- 508 regarding communication
- 219 regarding discharge

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National A&E survey 2016 results:

- 10% did not feel they were given enough information and 8% said they had no information at all
- 6% did not feel involved in their care

National Inpatient Survey 2016 results:

• 23% did not feel involved in decisions about their care

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#### Rationale – cont'd



Improving patient experience and communication is part of ED's 'SAFECARE' initiative. 'SAFECARE' stands for:

- S Sepsis
- A Analgesia
- F First seen/Time to be Seen
- E Entrust/handover
- C Consultant review RCEM standards
- A Admission time
- R Review by senior clinician
- E (Patient) experience

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#### Rationale – cont'd

Emergency Care Improvement Programme

Safer, faster, better care for patients

#### Rapid Improvement Guide to:

### The SAFER Patient Flow Bundle

Patients should be routinely involved and aware of the progress they are making. Patients (and/or their next of kin) should be able to answer these questions:

- 1. What is wrong with me or what are you trying to exclude?
- 2. What have we agreed will be done and when to 'sort me out'?
- 3. What do I need to achieve to get me home?

- simplified to 3 questions
- 4. Assuming my recovery is 'ideal' and there is no unnecessary waiting, when should I expect to go home?

All members of ward / departmental teams should be able to discuss and explain the EDD. Simple patient information cards can help by clearly stating what is going to happen to patients today and tomorrow.

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Improvement



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#### **Baseline data**

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# Baseline staff (n=52) and patient (n=196) surveys on the '3 questions'

Do you know why you are here today?		Response Percent	Response Total	
1	Yes		97.45%	191
2	No		2.55%	5
Do you know what is happening to you next and when?		Response Percent	Response Total	
			Percent	Total
1	Yes		73.98%	145

Do you know when you can leave here?		Response Percent	Response Total	
1	Yes		53.57%	105
2	No		46.43%	91

		Response Percent	Response Total	
1	n/a		7.69%	4
2	0 - 10 mins		13.46%	7
3	10 - 20 mins		26.92%	14
4	20 - 30 mins		13.46%	7
5	30 mins +		38.46%	20

#### What did we do?



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We designed two communication tools:

- ED Information Card
- My Hospital Journey Booklet (Both branded 'Keeping You In The Loop')

Both tools were designed by health professionals and patient representatives

Both tools were trialled late in 2017:

- ED Information Card trialled in Majors
- My Hospital Journey Booklet piloted on 4 wards

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#### **ED Information Card**

Derby Teaching Hospitals MHS

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Hospital Number:	The plan is that I will:
I have been seen by:	I will probably go home
l am now waiting for:	I can eat:         I can drink:           Yes         No
CT Scan/Other Scan Blood Results	Please see
Further Review     Other	For your current waiting times.
	s or are due any of your usual medication.
e see the notice board for additional in keep you informed about developme	formation regarding nearest facilities, opening times e

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#### My Hospital Journey Booklet

#### Derby Teaching Hospitals MHS

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Patient	ID: Today's Date:
	Why am I here today?
þ	What is happening to me next and when?
	When can I leave here?
	Completed by: Role:

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#### **Learned lessons**





- Staff time to complete the tools
- Timing of when to trial full beds and other projects!
- Not every patient wants a lot of detail needs to be tailored to them (and some won't want it at all). Avoid jargon and technical language save that for patient notes!



#### **Results/outcomes**



#### **ED Information Card**

- Patients said they found it useful because it's simple
- Relatives found the ED Information Card helpful to avoid having to ask staff questions
- Volunteers found the ED Information Card useful for specific qs like 'Can I get the patient something to drink?' without having to ask staff



#### **Results/outcomes**



#### My Hospital Journey Booklet results:

• Patients continued to have a high understanding of why they were in hospital (99%, compared to 97% baseline)

- **Big improvements** were seen on the other 2 questions:
  - 96% felt they were kept up to date with what was happening next (compared to 74% baseline)
  - 96% felt they were kept up to date about when they would likely be discharged (compared to 74% baseline)

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#### **Next steps**





- Working on amendments to booklet (e.g. page for carer comms, posters instead of booklets)
- Recent complaints around being discharged before 'back to baseline'. Add additional question: "How well do I need to be to leave?"
- Exploring potential for an app/electronic version of booklet
- Introduction to ED Information Card for doctors local
  - induction
    - Continuing to monitor patient feedback on communication and information



# Thank you for listening!

## **Any questions?**



