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Involving Patients in QI

Good day, movers and shakers.

This week's EQUIP blurb is co-written with Alex Trew, our data guru. We're sending this email because we need to send one every week – oops, I mean because we firmly believe that patients need to be incorporated into the programme and its methodology. And while the first part of the sentence is a joke, but the latter is *not*. This is because in our programme we endeavour to improve the lives of staff while providing the best possible care to patients. This means that patients should always be kept in mind! Also, on a more practical note, if you don't involve patients in some of your projects you might end up testing a change idea that patients simply hate! Now what's the point in that?! As an example, a QI group I was coaching thought it would be a great idea to get back to our e-consult patients "within 24 hours of receiving their email". Um, no wonder our patients didn't bother sending us e-consults. (Insert eye-roll emoji here)

So. Why should we involve patients?

If you choose to involve patients in your projects, you will bring in a whole new perspective into the QI teams. Their knowledge and experience will be invaluable to your project as it will be a catalyst for creativity and innovation. Patients will be able to help generate new ideas, prioritise existing change ideas and assess the impact of QI ideas on the patient experience. This is all important stuff!

As for you, as a practice, you will develop a stronger understanding of the patient experience and the areas that affect patients the most. We all think we see the big picture, but we kind of always miss some of the pieces. Often the ones we don't want to see. Like when we think it's great service to wait 24 hours to answer e-Consults... (eye roll again)

What level of patient engagement do we want?

There is no gold standard here for patient involvement. They can be involved just a little bit or they can be involved in the whole process, it is entirely up to you. To help you decide, have a look at the below options:

- **involvement with a little "i"**: means asking the people who use your service if they have noticed the improvements.
 - o Can be done via a survey, focus groups or inviting patients into certain meetings (data wall session, brainstorming and ideas generation).
 - o Generally easier to do as it is less labour intensive
- **Involvement with a big I**: means involving service users and carers directly in your QI project. This includes project development and delivery.

- Requires a great deal of investment in the patients themselves
- Note: May not need to involve patients in every project, or at every stage.

Whichever type of involvement you decide on, it is extremely important to maintain communication with patients on what is happening in the practices. This includes changes made, progress and outcomes of projects. The goal here is to make patients aware of what is happening QI wise.

How can you contact patients?

This is the easy part. Now that you've decided to involve patients and what level of involvement you would like, all that's left is actually to contact patients. This is done simply by going to where patients are and talking to them.

- Meet patients in the waiting room and ask them if they would like to be involved
- Use existing Patient Participation Groups (PPGs)
- Peer to peer recruitment: ask patients already involved in the practice to simply ask other patients if they would like to participate
- Formally invite patients to meetings through emails, texts etc.
- Ask the QI team to bring in several patients to the next QI meeting
- Target frequent users

How do you ensure patient involvement?

This is the trickiest part. (Easy first, tricky later. Keeps you reading. ;-)) Now that you have a few patients involved or are at least willing to be involved, how do you keep them? This involves a range of different things:

- Understand the time each patient is willing to commit
- Provide incentives:
 - Expenses e.g. travel, cover for care e.g. day care
 - Financial: It is inappropriate for patients to be the only ones involved that are not being compensated. This should be discussed at the beginning of the patient's involvement. Make it clear that the patients commitment and input is an important part of the project
 - Unemployed patients will be able to put any QI experience on their CVs which will improve their employment prospects and help in their personal development
- Provide training opportunities. This will ensure that patient participation is efficient and relevant.
- Digital Engagement: Make patients feel like part of the team by including them in WhatsApp groups, slack groups etc. and maintaining contact with them
- Communication: ensure that the patients involved know what's going on even if it is a brief update

And that's a wrap, folks. Really hoping we can start to bring in the big guns, big time. (The big guns being the patients, in case that was lost on anyone.) Any especially successful experiences around this – please let us know! We'd love to hear. Be the first. 😊

Virginia

Sent by my carrier pigeon, Percy Finklebeery