

Quality Care - for you, with you



Patient and Client Experience Framework

Respect, Attitude, Behaviour, Communication, Privacy and Dignity

Using patient and client experience feedback to inform quality improvement

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1. Overview

The way people experience health services is a key component of the quality of care. Measuring patient and client experience is important not only to guide quality improvement, but also because people's experiences of care may be linked to clinical outcomes and costs (Riskind, et al, 2011). A systematic review of 55 studies in primary care and hospitals found consistent positive associations between patient experience, patient safety and clinical effectiveness for a wide range of disease areas, settings, outcome measures and study designs (Doyle et al, 2013). This supports the case for including patient experience as one of the central pillars of quality in healthcare.

'It supports the argument that the three dimensions of quality should be looked at as a group and not in isolation. Clinicians should resist side-lining patient experience as too subjective or mood-orientated, divorced from the 'real' clinical work of measuring safety and effectiveness' (Doyle et al, 2013, p1).

Policy Drivers

In Northern Ireland, two reports published on 25 October 2016 *Health and Wellbeing* 2026 – *Delivering Together* (Departmental Report) and the report of the Expert Panel *Systems not Structures: Changing Health and Social Care* (Bengoa Report) set the direction for health and social care in Northern Ireland.

The expert panel report makes 14 recommendations based on a new model of care that moves towards a more patient centred, population health model delivered at a sustainable cost. The report focuses on the infrastructural changes needed for a new model of care and building this round a framework such as the *triple aim*. The triple aim essentially focuses around three objectives:

- 1. Improving the patient experience of care
- 2. Improving the healthcare of the population
- 3. Achieving better value

The expert panel have asked for a fourth dimension to be added to this framework that is based on *improving the work life of those who deliver care* – the quadruple aim.

The departmental report describes a new model of care that is person centred and is focused on prevention, early intervention, supporting independence and well-being. The approach to this model of care is based on co-design and co-production of new and reconfigured services to support a new way of working.

2. Introduction

Implementation of this Patient and Client Experience Framework will ensure that the Trust has a co-ordinated approach to listening to, and learning from, patient feedback and working together with our patients and carers to continually review and improve our services.

3. Executive Statement

The Southern HSC Trust is committed to obtaining patient and client experience feedback in all services it provides. The Trust sees patient and client experience feedback as essential to continually evolve, develop and maintain high quality patient-centred services.

When carried out in accordance with best practice standards, patient and client experience feedback can:

- provide assurance of compliance with patient and client experience standards
- identify risk / act as an early warning mechanism
- improve quality of care and patient outcomes

The Trust is committed to ensuring that implementation of this patient and client experience strategy delivers these benefits. Achieving the objectives set out in this strategy will ensure that patient feedback is part of a systematic approach to improving healthcare services for patients.

4. Organisational context

In April 2009, the DHSSPS published the 'Improving the Patient & Client Experience' standards document which describes what a patient can expect to experience when using health services in Northern Ireland (DHSSPS, 2009). The development of the standards incorporated a significant consultation and involvement of patients, carers and services users or their representatives. The following five core standards have been identified as important towards ensuring a positive experience:

- Respect
- Attitude
- Behaviour
- Communication
- Privacy and Dignity

All Trusts including the Northern Ireland Ambulance Trust (NIAS) adopted these standards which have been embedded into the commissioning process. Therefore, when we measure the patient experience, we will measure these core standards (See Appendix 2).

5. Scope

The framework applies to all healthcare staff involved in measuring and interpreting Patient and Client Experience feedback; to staff who facilitate patient and client experience and quality improvement and those staff who have the responsibility for monitoring and reporting the outcomes of patient and client experience activity. As such, the strategy should apply to all staff working in the Trust.

6. Definition of Patient and Client Experience

Patient experience is defined as 'the sum of all interactions, shaped by an organization's culture, that influence patient perceptions across the continuum of care' (The Beryl Institute).

It is the 'how' experience feels for those who live it: 'This is what happened to me and this is how I feel about it'.

7. Framework aim

The overall aim of the Framework is to ensure that the Trust actively seeks the views of the people who use our service, that we listen and learn from the feedback received and use this to actively engage with staff to continuously improve the standards of the service we provide.

8. Objectives

- To overcome barriers to healthcare staff participating in measuring patient and client experience feedback.
- To ensure that healthcare staff have the necessary competency, support and time to participate in measuring patient and client experience, interpreting patient and client feedback and identify areas for quality improvement / practice development.
- To ensure that healthcare staff have access to effective tools that will give them useful information about the patient and client experience.
- To ensure a combination of feedback methods is used to get a full picture of patient and client experience for the organisation.
- To develop a partnership approach with healthcare staff and service users to measure patient and client experience and interpret patient and client feedback to inform quality improvement initiatives.

- To demonstrate the benefits of using a systematic approach to obtain patient and client experience feedback and interpret patient feedback to inform quality improvement initiatives.
- To ensure that the Trust is compliant with Regional patient and client experience work stream priorities.
- To establish a robust system for reporting the outcomes of patient and client experience activity to the PCE Steering Group and the Trust's PCE Committee.
- To ensure patient and client experience activities are fully integrated with other quality improvement approaches and programmes.

9. Patient and Client Experience Work Plan

The Frameworks objectives will be operationalised in work plan agreed and authorised by the Trust's PCE Steering Group and PCE Committee. This work plan will be supported by an electronic project management action plan.

References

DHSSPS (2009) Improving the Patient and Client Experience, DHSSPS, Belfast; http://www.nipec.hscni.net/download/projects/previous work/provide adviceguidanceinf-ormation/patientexperience/PatientEx-standards.pdf

Doyle, C., Lennox, L. and Bell, D. (2013) A systematic review of evidence on the links between patient experience and clinical safety and effectiveness, British Medical Journal (*BMJ*) Open 2013; http://bmjopen.bmj.com/content/3/1/e001570 Accessed April 2017

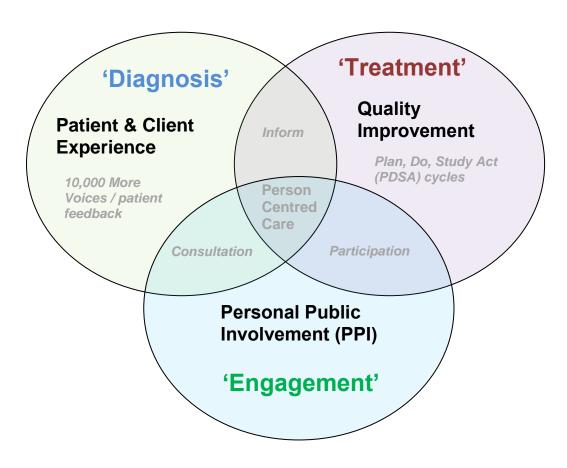
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Department of Health (2013) *Systems Not Structures: Changing Health and Social Care,* DoH, Belfast; https://www.health-ni.gov.uk/publications/systems-not-structures-changing-health-and-social-care-full-report

The Beryl Institute Website, Defining Patient Experience, http://www.theberylinstitute.org/ Accessed April 2017

Appendix 1: Patient & Client Experience, Quality Improvement and PPI Interface



Appendix 2: Patient / Client Experience Standards (DHSSPS, 2009)

	RESPECT		
Standard: All health and social care staff s	how respect in all contacts with patients and clients.		
This standard will be recognised when all staff members display a person centred approach in			
their care and treatment or in their contacts with patients and clients.			
This is demonstrated by:	The standard is achieved when:		
Patients' and clients' wishes being respected	 Patients and clients report experience of being respected and involved in decision making regarding their care and treatment. 		
Respect for diversity and difference	 Patient and client representative groups report a patient and client focus in their involvement in service development and improvement activities 		
 Patients and clients being actively involved in decisions regarding their care 	 Evidence shows that the organisation values people 		
Members of staff providing care that is personalised	 Staff members report that induction, ongoing learning and development activities promote respect for patients and clients and a person centred approach 		
 Patients' and clients' interests being given priority by members of staff and teams 	 Patients and clients report that unavoidable interruptions during care processes are managed sensitively 		
An organisational culture where respect for the individual is valued			
	ATTITUDE		
Standard: All health and social care staff s	how positive attitudes towards patients and clients		
_	personal approaches and responses to patients and		
clients by all members of staff show care a	•		
This is demonstrated by:	The standard is achieved when:		
 Welcoming and approachable staff who demonstrate a willingness to help 	 Patients and clients report experiences of positive attitudes towards them 		
Staff understanding the effect their verbal and non-verbal communication has on others	Patients, clients and staff members report that the organisational culture is conducive to positive attitudes at individual and team levels		
 Staff demonstrating a non- judgemental attitude towards patients and clients 	 Staff members report high levels of satisfaction with learning and development activities and maintaining positive staff attitudes 		

Staff being open minded towards	There is evidence of well organised and managed
new or better ways of caring and	environments with dedicated, compassionate
working	and professional staff.
 Organisational structures and 	
processes that enable staff to take	
sufficient time to show positive	
attitudes to patients and clients	

BEHAVIOUR

Standard: All health and social care staff show professional and considerate behaviour towards patients and clients

This standard will be recognised when all members of staff involve patients and clients in their care, respecting their wishes and showing professional and appropriate behaviour.

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This is demonstrated by:	The standard is achieved when:
• Staff seeking patient and client	• Patient and clients report that they were asked
consent when appropriate	for their consent where appropriate
All staff being polite, courteous and	• Patients and clients report that they have been
professional	called by their preferred name
Staff being open and receptive to	• Patients and clients report being treated in a
feedback and challenge	polite, courteous and professional manner
Patients and clients being called by their preferred name	• Evidence shows that the organisation has implemented local policies that outline what is expected in the behaviour of staff.
Staff respecting the personal space	Evidence demonstrates responsiveness to
of patients and clients	expressed views and challenges

COMMUNICATION

Standard: All health and social care staff communicate in a way which is sensitive to the needs and preferences of patients and clients

This standard will be recognised when all staff members engage in effective verbal and non-verbal communication leading to clear information being exchanged between staff and patients/clients.

This is demonstrated by:		The standard is achieved when:		
•	Staff adapting their verbal and non-	•	Patients and clients report that	
	verbal communication to be sensitive to		communication has been sensitive to their	
	individual needs		needs and respectful of their preferences	
•	Staff giving clear, correct information,	•	Patients and clients report that they have	
	using appropriate language		been provided with clear, correct	
			information using language they understand	
•	Staff using effective communication skills	•	Patient and client communication	
	such as active listening to check the		demonstrates that the important elements	
	patients' or clients' expectation and		of communication exchange have been	
	understanding		recorded appropriately	

Staff undertaking learning and	Staff members report that respectful and
development activities relevant to	sensitive communications are part of the
communication	organisational values.
Important elements of communication	
exchange being recorded accurately	
Staff involving carers and family	
members where appropriate	

PRIVACY and DIGNITY

Standard: All health and social care staff protect the privacy and dignity of patients and clients at all times.

This standard will be recognised when staff members ensure that all environments where care is provided protect the privacy and dignity of patients and clients.

This is demonstrated by:	The standard is achieved when:		
 Staff ensuring that the modesty of patients and clients is protected, respecting cultural diversity. 	 Patients and clients report that discussions relating to their personal information were held in a way that maintained their privacy and dignity. 		
 Staff receiving training and development relevant to their needs to support the maintenance of patients' and clients' privacy and dignity 	 Patients and clients report that their privacy and dignity has been protected throughout their health and social care experience. 		
• Effective use of available resources in all health and social care environments to secure privacy and dignity for patients and clients.	 Evidence shows organisational arrangements exist which are aimed at protecting privacy and dignity for patients and clients. 		
 Staff ensuring that patients' and clients' personal information is collected, utilised and stored in a way that maintains confidentiality. 	Staff report that maintaining patient and client privacy and dignity is encouraged and supported by the organisation		