



Cardiac Rehab and Patient Experience

CRNGE

13th July 2010



South London
Cardiac and Stroke Network

Overview

- Political Perspective
- Network Activities
- Programme Level

Political Perspective

- Labour Government
 - Darzi
 - Quality
 - Safety, Experience and Effectiveness of care
- Coalition Government
 - Patient led NHS
 - Local accountability
 - GPs leading commissioning

“No decision about me without me”

White Paper Published on Monday



Andrew Lansley

- First, that patients must be at the heart of everything we do – as more than simply beneficiaries of care, but as participants in its design.
- Second, the NHS must be focused on achieving continuously improving outcomes for patients – not inputs or processes, but results.
- Third, we must empower clinicians – those responsible for patient care – to deliver those improvements.
- Fourth, if we are to improve overall health outcomes and make the demands on the NHS more sustainable, we must prioritise prevention and create a public health service.



Andrew Lansley

- Shared decision making
- Information revolution
 - Safety and patient experience
 - Patient choice

“We need to see the service from the patients’ point of view, to listen to patients, to shift power down through the system – and, where possible, to put power and control into the hands of patients themselves”



More Andrew Lansley

- I want to talk about perhaps the most important and fundamental issue of all – improving outcomes for patients
- We have to develop proper measures of quality which prioritise what matters to patients – not boxes ticked and processes followed – but their actual health outcomes.

Network level

- Patient diaries
 - Adding in family members and their views
 - Feedback to inform recommendations
 - Impact on service
- Discovery Interviews
- Commissioning Outcomes for CR
 - Patient experience questionnaire

Patient Diaries – Findings

- Pre assessment clinic good
 - except for waits for other tests
- Staff highly praised, especially PAC and anaesthetists
 - But staff were noisy at bedtime
- Family members very concerned at being sole carers post discharge
 - Discharge DVD helped
- Disinterest from GP practice
- Long wait for rehab
- Isolation
- Not knowing if things were normal
- Need for visit or phone call within first few days post discharge

Patient Diaries – Next Steps

- Feedback to all areas and staff groups involved
- Discussed with Network Patient Group
 - Lack of information at discharge common issue
- Audit of *written* discharge information at all tertiary centres in South London
- Online information via network website
 - Directing to relevant sites such as BHF
 - Patient and family member story
- Rehab led follow up
 - Timely fashion from patient perspective

Discovery Interviews

- Review of previous interviews
- Reinforced findings from patient diaries
 - Patients felt needed support from health professionals soon after leaving hospital
- Need to address this issue

Yet More Andrew Lansley

- *And listening to patients – asking, reporting, and learning from patient experience – will be of great importance in designing and improving services, including achieving greater efficiency.*
- *But the NHS too often asks insufficiently penetrating questions, insufficiently often, of too few patients.*
- *I have seen other hospitals asking more immediate questions, with more relevant and particular questions, like, “when you pressed the call button, was the response what you expected, better than you expected or worse than you expected?”. That’s how you get real answers about the care that’s being provided.*

Satisfaction or Experience

How satisfied were you with the lunch today?

1 2 3 4 5

Very
satisfied

Very
dissatisfied

What was your experience of getting to this meeting?

1 2 3 4 5

Very
poor

Very
good



Patient Experience Questionnaire 1

- Pan London CR Commissioning Outcomes
- Clinicians suggested sector wide questionnaire
- Pilot asked patients
 - What was better than expected
 - What was worse than expected
 - One word to summarise experience

Patient Experience Questionnaire 2

- Patient emphasis
 - Inspirational Staff
 - Some not so inspirational
 - Individualised Exercises
 - Some not so individualised
 - Disability, hearing
 - Education and Information
 - Before and after
 - Facilities/venues

Patient Experience Questionnaire 3

- Issues to be agreed
 - Frequency of questionnaires
 - Mechanism of reporting
 - Sharing of information
 - Information revolution!
- DNAs and drop outs?

Review of questionnaire



In Summary

- Patients at the heart of everything we do
 - as participants in its design as well as beneficiaries of care
- Outcomes important
 - And sharing those outcomes
- Evidence about what is important
 - Support immediately post discharge
- Individual programmes need to think about how can fit with political changes

Questions for your service

- How much shared decision making do you do with your patients?
 - Can you demonstrate that?
- What information do you collect from patients about their views of your service?
 - What do you do with that information?
 - Can patients use it to chose between services?
- How can you demonstrate that your service reflects what your patients want?
 - To patients and commissioners (including GPs)

Thank you



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