

Case Study

CAPRI

CAPRI – Clinical Audit Patient Representative Initiative

Set up

The Clinical audit team at Calderdale and Huddersfield NHS Foundation Trust first heard about a *patient panel* at a National Clinical Audit Conference in 2004 from a presentation by North Bristol NHS Trust. They followed this up by attending a number of PPI events, gathering information and advice, and visiting other trusts that had established a patient panel, for example, Sheffield pct (CAPP).

The clinical audit team had previously worked with service users and carried out a one-off audit project involving service users but the recruitment process had taken a long time so they decided to establish a working group including a patient representative to look into the feasibility of having a patient panel at the Trust.

Having looked into a number of issues they put together a proposal for the Trust Board which included the financial implications and they received approval to move forward in December 2006. The patient panel was renamed CAPRI – Clinical Audit Patient Representative Initiative. (see attachment 1 – add the brain storm)

Training package

They piloted a training package on new staff and interested service users, which covered five main areas:

- History and background of clinical audit.
- The clinical audit cycle and process.
- Getting started with an audit project.
- Changing practice and information on the CAPRI.
- Their role and confidentiality.

Recruitment

Their first successful round of recruitment came on a Cancer Patient Audit Feedback day; this was championed by one of the Consultant Oncologists who is very involved in clinical audit and supported the search for a patient group. The next step was to access the Foundation Trust's Membership database to expand their recruitment search. Since then, posters, leaflets and fliers have been left in wards and outpatient departments and have been handed out at student Fresher's Fairs in an effort to increase the number of younger people in CAPRI (all attached).

As Calderdale moved from being an NHS Trust to a Foundation Trust, the CAPRI members are also able to become members of the Foundation Trust, and one is also member of the Trust Board.

"I joined CAPRI because I thought it was important that the Health Service should take into account patients' views about how the service could be improved. As a CAPRI member I have been involved in

audits from their early stages to final completion; all have been very professionally conducted, and involved contact with patients and staff. Real improvements in the service have been achieved, and this makes it all worthwhile.” Bill Ellis, CAPRI Member.

Clinical audit examples

One example of CAPRI’s work was a review carried out of the acute stroke in-patient services, where patients were asked about all aspects of their patient journey in face to face interviews. The questions had been prepared before the CAPRI team met; they thought that some questions were too complex, ambiguous in places and suggested changes. Historically, stroke patients with communication difficulties such as slow speech, problems with memory and restricted movement are often overlooked for interviews but the Speech and Language Therapy Team (SALT) wanted to try and include them and gather their views. CAPRI members attended a training course to learn how to communicate with these patients and together SALT, the audit department and CAPRI worked to develop various communication tools. This involved learning different communication skills like sitting in front of the patient and speaking clearly. Tools included pictures, bright coloured ‘Yes’ or ‘No’ boxes and Lickert scales they could point at or nod to confirm their answer. The tools followed the layout of the questions asked to the other patients.

CAPRI was very keen to ask this particular group of patients and saw this as making a valuable contribution to improving the stroke patient service. Nursing staff there would not have had time to take the training and ask the questions. Many patients prefer to talk to people they feel are neutral or independent of the care they are receiving.

The findings have yet to be finalised but for CAPRI the project had changed and became more about ensuring they engaged with this usually ‘hard-to-reach’ group.

“We couldn’t have done it without CAPRI, they were very keen to work with a group that had not been able to give their views in the past and this became the point of the project. They have been so generous with their time and are always popping in and out that sometimes it feels like they’re part of the staff. It is currently a small group but they are all very dedicated individuals so it works in our favour.” Jacky Mason, Clinical Governance Team Leader

CAPRI members work as part of the audit project team, this means they may be the only service user in the group or one of two or three. It depends on the type and size of project. CAPRI is managed via a partnership between the clinical audit team and the CAPRI members. Originally the audit team envisaged the CAPRI members holding and chairing their own meetings but the CAPRI members decided they were happy to work as part of the audit team.

The whole group meets three-four times a year. The meetings are a chance for the whole group to get together and an opportunity to share their experiences of involvement in various projects. It also allows the audit team to tell CAPRI of any forthcoming projects and ask who would like to be involved.

CAPRI are about to start work on a new Electronic Discharge Summary form. The members who would like to be involved will set the questions to ask patients, participate in the data collection and then will

work with the team to plan the next stage based on the results of the audit. CAPRI are moving towards being involved in every stage of relevant clinical audits, adding value to every aspect of the cycle.

Problems and benefits

Even with wide promotion the group is small and unrepresentative. They are working on finding younger people to join by targeting healthcare students, however the small group are extremely hard working and dedicated.

“The main benefit of having CAPRI is that we are involving patients at the heart of service development, which was one of the key actions identified from our Healthcare Commission inspection.” Jacky Mason, Clinical Governance Team Leader

“With careful guidance from professionals I felt I made a valuable contribution to the audit department. A useful and informative way of giving something back to the Healthcare Service which gave me excellent treatment when I needed it.” Madge Parker, CAPRI Member

Conferences and awards

Calderdale and Huddersfield Trust along with CAPRI attend regional and national conferences to talk about real patient and public involvement, and to share good practice and generate interest.

In October 2008, CAPRI and the clinical audit team at the Trust won an Innovation award where they posed the question: “Can Active Patient Involvement Really Influence Change?” They were commended for their partnership and that results of some of their clinical audits had highlighted best practice. (attached brain storm poster....)

For more information and helpful ideas see the attached posters and leaflets and the below Top Tips from Calderdale and Huddersfield Trust.

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TOP TIPS

- **Start small**
- **Need dedicated working group**
- **Get a champion from amongst clinicians (if possible)**
- **Be clear what you want from CAPRI member when designing volunteer and confidentiality forms**
- **COMMUNICATION – on all levels**
- **Don't be afraid to take your time – get frequent feedback from managers and your colleagues.**
- **Don't give up!**