

HQIP Case study: User-led audit of a urology service

This submission demonstrates:

- Patient representation at all stages of the clinical audit
- Patient led data analysis and dissemination of results

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Wrightington Wigan & Leigh NHS Foundation Trust http://www.wwl.nhs.uk/

Summary

A new Urology service was to be set up within the Trust. It was important to find out from patients what their priorities in terms of the service would be. Patients attending clinics were asked to choose a topic (from a list of five that were relevant to the service).

Lay audit members were asked to help out with the project in terms of both the original questionnaire and then onto the actual chosen project.

Several meetings were held between the lay members and audit department staff to agree on standards/criteria and the formulation of a suitable patient questionnaire.

Once agreed, lay members attended a series of clinics to interview patients and to gather the information required. All the information was put together and lay members provided assistance to analyse the data and create a power-point presentation.

Once completed, one of the lay members presented the project at a local specialty audit meeting and agreed some changes to practice.

Background

- Urology services were being transferred to a new, purpose built unit on another site within the Trust
- Clinicians felt that the public should be involved in shaping the new services
- Lay audit representatives had recently been appointed so it was felt that they should be involved both to obtain patient views and to make recommendations for improvement

Aims

- To determine whether Urology Services provided could be improved
- Determine what changes would be required to improve services

Objectives

 To discover what changes/if any need to be made when the new unit is opened







Approach

- Patient representatives appointed specifically for audit purposes
- Representatives invited to attend specialty audit meetings / Audit Chairs meetings and have input into the meetings
- To take this further, one or two Clinicians have agreed to undertake pilot audits using lay reps
- Meeting set up between clinician, lay reps and audit staff
- A list of audit topics was drawn up by clinicians
- Patients attending urology clinics asked to state first preference for choice of audit from five that were chosen by patient reps
- Approximately 200 patients voted
- Clear preference was patient experience in first Urology clinic
- Standards agreed
- Patient questionnaires drawn up in agreement between lay reps/ clinician/audit staff
- Patient representatives attended clinics to interview patients
- Some questionnaires were returned via pre-paid post
- Questionnaires analysed by patient reps with help from Audit Department
- Power-point presentation completed
- Patient reps in discussion with audit lead agreed some recommendations and conclusions
- Patient rep presented the project to clinicians at a local Urology specialty audit meeting
- Actions discussed at meeting (some of which have now been completed)

Challenges

- Getting clinicians on board initially
- Ensuring regular contact between lay reps and clinician (slow to progress initially)
- Choosing suitable projects (Reps not able to look through personal patient data)

Outcomes

- Recommendations made in relation to possible alternative car parking arrangements/information leaflets to be sent out/information regarding transport, directions to clinic etc (now actioned)/improved clinic templates (waiting times) and appointment letters
- Discussed further standard target for time taken to see patients
- More clinicians have expressed a wish to have lay audit reps on board

Conclusion

- Overall results showed urology are providing a good service. Most patients are being seen within six weeks, 100% of patients felt they were treated with respect and dignity and most would recommend the service to family and friends
- Lay audit team were praised by all clinicians present at the audit meeting for an excellent piece of work

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