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Patient voices are still not being heard says Bournemouth University study

Bournemouth University (BU) research has shown that there are still many areas in the NHS that are failing to provide 'patient-centred' services despite efforts by the Government to ensure the views of services users and providers are fully taken into account.

The findings were highlighted by School of Health & Social Care researcher Sue Baron, a nurse and a former patient, from a qualitative study which investigated The City Hospitals Sunderland NHS Trust (CHS) 'Patient Journey'* approach to patient-centred health care.

During the 'live' part of the project, a new 'Patient Journey' was implemented in the South West of England, and information was collected about current services from a number of sources such as patients, consultants, Trust managers, nurses, physiotherapists, occupational therapists, pharmacists, radiographers and medical secretaries. The multi-disciplinary 'Patient Journey' project team who participated in this research used the information to make patient-centred improvements to their service.

Sue's research identified a number of recommendations including the need to:

- Ensure there is greater recognition of the value of the patient's voice
- Improve the information systems between primary and secondary care to mitigate the risk of patients 'falling through the net' during GP referrals, patient discharge and outpatient follow-up
- Standardise NHS uniforms to enable all patients, and staff, to readily identify who's who
- Centralise patient records – one place for inter-professional documentation to mitigate risks to patients arising from misinformation or lack of information, reducing duplication, saving time, and increasing patient safety

- Ensure that NHS management are regularly seen by staff and patients, for example at 'walkabouts' where managers visit the wards and talk to patients and staff so that they are kept in touch with what is happening at the frontline of health care.

Sue said: "As a former patient, my own experiences have taught me that friendly, compassionate staff who listened to me and interacted with me, and in whom who I felt able to place my trust, reduced my anxiety and made me feel safe. They were central to my experience, and really could make the difference to me.

"The learning from these experiences forms the basis of my own practice as a nurse. I know how important it is to be friendly and compassionate, so that patients feel able to talk and let me know what is important to them, and we might become partners in their care. As a researcher I have learnt how valuable hearing about patients' healthcare experiences can be in providing the evidence on which patient-centred service improvements can be made. Hearing the patients' voice really can make a difference in all aspects of health care"

She added: "In spite of the ever increasing emphasis on the provision of personalised NHS healthcare and the existence of numerous approaches, frameworks and models to facilitate its delivery, excellence in patient-centred healthcare continues to evade many areas of the NHS.

"It might be argued that one reason for this is that many of these initiatives still appear to be failing to reach or include 'front line' staff. Of those which do, few appear to incorporate feedback from patient interviews, or draw on membership from across the broad range of disciplines associated with a patient's healthcare journey when seeking to redesign or improve services."

Sue interviewed a number of patients, aged between 45 and 80 years, on a range of topics including time from initial GP appointment to appointment, telephone contact with hospital, communication and information, short notice/emergency admission, relationships with healthcare professionals, nurse workloads, healthcare delivery, privacy and dignity, cleanliness/infection control, hospital catering, patient-line, visiting, car parking, discharge, transport and outpatient appointments / follow up care.

Although overall the participants spoke very highly of the care they had received and were keen to express their gratitude to the staff concerned, there were a number of insightful and sometimes distressing comments:

“The doctors ... they talk to you but sometimes they talk over you, you know what I mean? You don’t know what they are on about.”

“They’ve all done a good job ... excellent; but the psychological side nobody tells you about the sense of isolation, the highs, the lows, the mood swings ... the tiredness, the possible after effects of anaesthesia and surgery ...”

“She undressed me totally ... went off ... left curtains ajar and I couldn’t do anything ... I felt terrible.”

“I like to have my hand held ... it is something I get great comfort from ...”

The research illustrates how the ‘Patient Journey’ process can provide an effective, evidence-based catalyst for change when supported by a fully engaged and dedicated inter-professional project team. In this instance a number of achievements were made in response to the issues identified during this ‘Patient Journey’ project such as:

- Doctors now have access to electronic diagnostic imaging results during patient consultations at other hospitals as the need arises (out-patient clinics).
- Patients are now only contacted by medical staff in the event of a short-notice surgical admission notification (previously admissions staff)**
- A dedicated telephone line / answer phone has been installed giving patients direct contact to the nurse practitioner for support/advice**
- Patient information sheets have been revised so that the information contained offers clearer information and guidance on pre-operative medications and hospital admission**
- Further patient information leaflets are under review**

* The City Hospitals Sunderland NHS Trust ‘Patient Journey’ is a *‘comprehensive practice development/service improvement’* model. The principal aim of this qualitative study was for an ‘outsider’ to implement a new ‘Patient Journey’ in an unrelated NHS Hospital Trust so that an impartial and independent evaluation of the model might be undertaken.

** These changes were directly influenced by feedback from patients.

Ends

Note to editors:

(1) BU was the fourth most improved University for research quality in the Research Assessment Exercise (RAE) 2008. Research relating to Nursing & Midwifery by the University was rated as world-leading achieving results in the highest possible categories (3* & 4*).

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Baron, S., 2009. Evaluating the patient journey approach to ensure health care is centred on patients. Nursing Times: 105 (22) 20-23 available online from <http://tinyurl.com/mnfxxm>