

Clinical Audit – Hillingdon Tissue Viability Service

Title

Patient Reported Outcome Measures (PROMS) Hillingdon Complex Wound Clinic. Rolling Quarterly audit.

14th February 2014

Project Members

Liz Ovens Audit Lead. Developed Audit tool. Report writer.

Lisa Glennon- data analysis

Tissue Viability Team– data collection

Patients – completed the audit tool

Background / Rationale

Patient Reported Outcome Measures (PROMS) measure quality from the patient's perspective. The High Quality Care for all the NHS next stage final review paper (Department of Health DOH 2011) outlined the strategy to ensure quality is at the heart of all care provision in the NHS. A previous pilot audit was undertaken to test the audit tool and appropriate adjustments were made to this accordingly. The audit measures four areas of quality provision from the patient's perspective, measured at initial assessment and at their four week appointment. This audit is now a rolling quarterly audit for Tissue Viability (TVT) and will also be rolled out to other service lines as appropriate.

The audit is linked to

CQC Outcomes 1,2,4,6,8,10, 11, 12, 16

Aims & Objectives

- Determine the clinical objective/outcome of the patient attending at first assessment and measure if objectives were met at 4 week appointment,
- Determine the expectations regarding dignity and respect at first assessment and whether their expectations were met at 4 week appointment.
- Determine expectations regarding prevention of infection at first assessment and whether their expectations were met at 4 week appointment
- Determine if appropriate any non-paid carer's needs

Criteria & Standards

Privacy and Dignity Challenges 2009
NHS Improvement Plan 2004
NMC Code of Professional conduct: standards for conduct performance and ethics (2004)
"Our Care Pledge To You" (2009)
Quality Care Indicators (2009)
Management of Patients with Leg Ulcers Guidelines (RCN 2006, HPCT 2005)
Wound Management Guidelines (CNWL HCH 2011)
(NICE) (2004) Type II Diabetes: Prevention and Management of Foot problems.
RCN and NICE (2005) The Management of pressure ulcers in primary and secondary care.
A clinical practice guideline.
All infection Control policies

Methodology

A simple questionnaire was developed to capture four key areas (see Appendix 1). The questionnaire was printed by Clinical Governance to allow scanning for data analysis. All new patients attending the Complex Wound Clinic (CWC) from August to October 2013 inclusive were given the questionnaire to complete at their first appointment. If carer's needs were identified the patient/carer was given an information leaflet and access to the Carer's Handbook to read if required. The questionnaire was then completed by the patient at their four week appointment. Once all the patients had attended their 4 week appointment (approx. mid December 2013), the forms were sent to Clinical Governance for analysis and the report written by the Tissue Viability Team (TVT).

Abstract

Key Results

35 new patients attended the CWC between May 2013 and July 2013 completing the questionnaire again at 4 week appointment.

Question 1. Objectives/ Clinical outcomes from service

What are your expectations/objectives/outcome regarding your treatment from the service (tick all that apply) eg reduction of pain, odour, irritation, healing wound, improved mobility.

- Pain reduction – 21 (60%) patients stated they wanted reduction in pain at First Assessment and more patients 20 (95%) stated that this objective had been met at 4 week appointment.
- Healing wound – 32 (91%) patients stated they wanted a healing wound at First Assessment and 29 (91%) stated that this objective had been met at 4 week appointment.
- Reduction in odour - 6 patients stated they wanted a reduction in irritation at First Assessment and more patients n=10) stated that this objective had been met at 4 week appointment.

Question 2. Expectations regarding care and dignity from service

What is important to you whilst receiving your treatment (tick all that apply) eg Kind caring/ courteous staff, involved in decision making, being listened to, having privacy, being treated as an individual.

- Kind caring/courteous staff – 33 (94%) patients stated at First Assessment that kind caring/courteous staff was important to them and 33 patients (100%) stated this was achieved by week 4 appointment.
- Privacy - 21 patients stated at First Assessment that having privacy was important to them. However more patients, (n=26) stated this was achieved by week 4 appointment.
- Being Listened to – 27 patients stated at First Assessment that being listened to was important to them. However more patients (n=28), stated this was achieved by week 4 appointment.
- Being treated as an Individual – 27 patients stated at First Assessment that being treated as an individual was important to them. More patients (n=29) stated this was achieved by week 4 appointment.

Question 3. Prevention of Infection

Prevention of infection is very important to us. What do you expect to enable good infection prevention precautions? (Tick all that apply) eg Good hand washing, use of regular alcohol gel, clean room/facility, clean procedure trolley, changing gloves as appropriate.

- Good hand washing – 34 (97%) patients stated at First Assessment that appropriate hand washing was an expectation for prevention of infection. 33 patients (97%) stated this was achieved by week 4 appointment.
- Clean Room/facility - 30 patients stated at first assessment that having a clean room/facility was important to them, more patients (n=31) stated this was achieved by 4 week appointment.
- Changing Gloves as Appropriate - 31 patients stated at First Assessment that changing gloves as appropriate was an expectation for prevention of infection and more patients (n=32) stated this was achieved by week 4 appointment.

Question 4 Unpaid carers.

5 (14%) patients stated they had an unpaid family member as a carer. 3 patients stated they would like further information regarding support and advice 4 patients stated at 4 week appointment that their carer had received this information and would contact agencies to support them.

Conclusion

The results of this audit are very positive demonstrating the Tissue Viability Team are providing high quality clinical services for patients with complex wounds in Hillingdon. The team are meeting the patient's clinical outcome objectives which have also been previously demonstrated in the several Outcomes Audits (HPCT 2006, HPCT 2007, HPCT 2008, 2009, 2010, CNWL HCH 2011b CNWL 2012b). The team are also providing dignity and respect and courteous, personalised and individual care and ensuring patient safety in prevention of infection.

Recommendations

Continue to undertake the PROM audit quarterly. Suggest to other services to adopt tool as appropriate to capture patient experiences and objectives of care provision.

No Quality Action required.

Limitations

There continues to be difficulty collecting the data regarding patient's carers since many patients do not appreciate/identify that their family members are non - paid carers. This will be addressed in future audits and the audit tool may be changed accordingly.

Some of the patients tend to tick all the objectives being achieved at 4 week appointment even though these were not identified and ticked by them as an objective at first assessment. This is most likely because the patient realizes at the four week appointment that these objectives have been met and often delighted at the results of the interventions.

Consequently at the 4 week appointment the numbers are higher than at first appointment for some of the objectives.

Results

35 patients attended for first appointment and four week appointment between August - October 2013 and completed the questionnaire. Patients completed the questionnaire themselves with help from carer/family or staff if required.

Q1. Objectives/Clinical Outcomes from Service.

First Appointment - What are your expectations/objectives/outcomes regarding your treatment from the service. Patients were asked to tick all that apply. 21(60%) patients stated they wanted the pain reduced, 32 (91%) stated they wanted a healing wound and 12 (34%) patients stated they wanted to improve mobility eg walking. Patients could tick as many objectives as they wanted.

Number of patients = 35

Objective	Frequency/Number
reduce pain	21
healing wound	32
reduce odour	6
reduce swelling	18
Improve functions and quality of life Mobility eg. Walking	12
reduce irritation	13

Q1. Objectives/Clinical Outcomes from Service.

4 week appointment. Were your expected clinical outcomes regarding your treatment from the service achieved?

Reduce pain

21 patients stated they wanted reduction in pain at First Assessment and 20 patients (95%) stated that this objective had been met at 4 week appointment.

Reduced Pain	Number/Frequency	Percentage
Yes	20	95%

Healing Wound

32 patients stated they wanted a healing wound at First Assessment and 29 (91%) stated that this objective had been met at 4 week appointment.

Healing wound	Number/Frequency	Percentage
Yes	29	91%

Reduction in odour

6 patients stated they wanted a reduction in odour at First Assessment. More patients (n=10) stated that this objective had been met at 4 week appointment.

Reduce odour	Number/Frequency
Yes	10

Reduction in Swelling.

18 patients stated they wanted a reduction in swelling at First Assessment. More patients (n=19) stated that this objective had been met at 4 week appointment.

Reduce Swelling	Number/Frequency
Yes	19

Improve function eg mobility and walking

12 patients stated they wanted an improvement in mobility eg walking at First Assessment and 9 (75%) stated that this objective had been met at 4 week appointment.

Reduction in Irritation.

13 patients stated they wanted a reduction in irritation at First Assessment and 11 patients (85%) stated that this objective had been met at 4 week appointment.

Reduce irritation	Number/Frequency
Yes	11

Q2 Expectations regarding Care and Dignity from service.

First Assessment. What is important to you whilst receiving your treatment. Patients were asked to tick all that apply. 33 (94%) patients stated that having kind/courteous staff was important, 27 (77%) stated that being listened to was important and 27(77%) stated that being treated as an individual was important. Patients could tick as many objectives as they wanted.

First Assessment expectations (patients)

Objective	Frequency/Number
Kind caring/courteous staff	33
Involved in decision making	30
Having privacy	21
Being listened to	27
Being treated as an individual	27
Nothing	0

Q2 Expectations regarding Care and Dignity from service.

4 Week Appointment. Were your expectations regarding care and dignity from the service achieved?

Kind caring/courteous staff

33 patients stated at First Assessment that kind caring/courteous staff was important to them and 33 patients (100 %) stated this was achieved by week 4 appointment.

Involved in Decision Making.

30 patients stated at First Assessment that being involved in decision making was important to them and 22 patients (73 %) stated this was achieved by week 4 appointment.

Having Privacy

21 patients stated at First Assessment that having privacy was important to them. However more patients, (n=26) stated this was achieved by week 4 appointment.

Being Listened to

27 patients stated at First Assessment that being listened to be important to them. However more patients, (n=28) stated this was achieved by week 4 appointment.

Being Treated as an Individual.

27 patients stated at First Assessment that being treated as an individual was important to them. However more patients, (n=29) stated this was achieved by week 4 appointment.

Q3 Prevention of Infection.

First Assessment. Prevention of infection is very important to us. What do you expect to enable good infection prevention precautions? (Tick all that apply). Patients could tick as many expectations as they wanted.

34 (97%) patients stated that appropriate hand washing was expected, 30(86%) patients stated that a clean room/facility was an expectation and 31 (89%) patients stated that changing gloves as appropriate was an expectation.

Number of Patients = 35

Expectations	Frequency/Number
Appropriate Hand Washing	34
Regular use of alcohol gel	31
Clean Room/facility	30
Clean surface/trolley	31
Changing gloves as appropriate	31

Q3 Prevention of Infection.

4 week appointment. Did you feel that there were good infection prevention precautions taken at ALL times? (Relate to first assessment objectives and tick all that were ticked/apply)

Appropriate Hand washing

34 patients stated at First Assessment that appropriate hand washing was an expectation for prevention of infection. 33 patients (97%) stated this was achieved by week 4 appointment.

Regular Use of Alcohol Gel

31 patients stated at First Assessment that regular use of alcohol gel was an expectation for prevention of infection and 30 patients (97%) stated this was achieved by week 4 appointment.

Clean Room/Facility.

30 patients stated at First Assessment that a clean room/facility was an expectation for prevention of infection. More patients (n=31) stated this was achieved by week 4 appointment.

Clean Surface/Trolley

31 patients stated at First Assessment that a clean procedure/trolley was an expectation for prevention of infection and 26 (83%) stated this was achieved by week 4 appointments.

Changing Gloves as Appropriate

31 patients stated at First Assessment that changing gloves as appropriate was an expectation for prevention of infection and more patients (n=32) stated this was achieved by week 4 appointment.

Q4 Do you feel you have a non-paid carer e.g. wife, husband, children?

First Assessment (n=35)

5 (14%) patients answered yes and 27 (77%) patients stated no.

First Assessment

4b. Does he/she have access to support groups?

First Appointment

4b	Frequency
Yes	0
No	7
Unsure	0

If no would they like information regarding this?

3 patients stated they would like information regarding support groups.

4b	Frequency
Yes	3
No	4
Unsure	0

4 week appointment

Q4b If you requested information regarding support groups for your carer did you receive this?

4 patients stated they did receive information they requested

Q4c Is he/she involved in decision making about your health?

3 patients stated their carer was involved in decision about their health.

First Appointment

4a	Frequency
Yes	3

No	2
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No patients stated they would like their carer to be more involved with decisions regarding their health. At four week appointment 1 patient stated that their carer was more involved with decision making regarding their care.

4c and 4d Do you believe their needs are met e.g. respite care, counselling, education?

1 patient stated at first assessment that their carer's needs were not met. 1 patient stated at first appointment that they would like further information regarding this and 2 patients reported on the questionnaire that their carer did not want any information. No patients stated at the 4 week appointment that their carer had received support.

The results in this rolling audit are similar to previous PROMS audits.

Conclusions

The results of this audit are very positive demonstrating the Tissue Viability Team are providing high quality clinical services for patients with complex wounds in Hillingdon. The team are meeting the patient's clinical outcome objectives which have also been previously demonstrated in the several Outcomes Audits (HPCT 2006, HPCT 2007, HPCT 2008, 2009, 2010, CNWL HCH 2011, CNWL HCH 2012, CNWL HCH 2013). The team are also providing dignity and respect and courteous, personalised and individual care and ensuring patient safety in prevention of infection.

Recommendations

Continue to undertake the PROM audit quarterly. Suggest to other services to adopt tool as appropriate to capture patient experiences and objectives of care provision.
Determine if there is a more appropriate method of capturing carer's needs in a future audit.

No Quality Action required.

Presentation

Business team to add findings on the CNWL HCH web site for patients/family to view.

References & Appendices

See below Appendix 1

Patient ID

First Assessment

Patient Related Outcomes Audit Tissue Viability

1. Objectives/Clinical outcomes from service:

What are your expectations/objectives/outcomes regarding your treatment from the service (Tick all that apply)

- Reduce pain
 Reduce Odour
 Reduce Swelling
 Healing Wound
 Reduce Irritation
 Improve mobility eg. walking

2. Expectations regarding care and dignity from service:

What is important to you whilst receiving your treatment (Tick all that apply)

- Kind caring/courteous staff
 Involved in decision making
 Having privacy
 Being listened to
 Being treated as an individual
 Nothing

3. Prevention of Infection:

Prevention of infection is very important to us. What do you expect to enable good infection prevention precautions?(Tick all that apply)

- Appropriate hand washing
 Use of regular alcohol gel
 clean/room facility
 Clean Surfacey
 None
 Changing gloves as appropriate

4. Support for non-paid carers/family

4a. Do you feel you have a non-paid carer e.g. wife,husband,children? Yes No Unsure

If Yes continue to answer question 4b,4c,4d

4b. Does he/she have access to support groups? Yes No Unsure

If no would they like information regarding this? Yes No Unsure

4c. Is he/she involved in decision making about your health? Yes No Unsure

If no, would you like them to be more involved? Yes No Unsure

4d. Do you believe their needs are met e.g. respite care, counselling, education? Yes No Unsure

If no, would he/she like some information regarding this? Yes No Unsure

Date of Assessment:

Review Appointment (4 weeks later)

1. Objectives/ clinical outcomes from service

Were your expected clinical outcomes regarding your treatment from the service achieved? (Relate to first assessment objectives and tick all that apply)

Reduce pain Yes No Healing wound Yes No
Reduce odour Yes No Reduce swelling Yes No
Reduce exudate Yes No Mobility eg walking Yes No
Social eg swimming Yes No Reduce irritation Yes No
Other (please state) _____ Yes No There were no objectives

2. What were your expectations regarding care and dignity from service achieved? (Relate to first assessment objectives and tick all that apply)

Kind caring/ courteous staff Involved in decision making
Being listened to Having Privacy Being treated as an individual

3. Prevention of Infection

Did you feel that there were good infection prevention precautions taken at ALL times? (Relate to first assessment objectives and tick all that apply)

Good hand washing Yes No Use of regular alcohol gel Yes No
Clean room/facility Yes No Clean procedure trolley Yes No
Changing gloves as appropriate Yes No

4. Support for non-paid carers/family (if appropriate)

4a if your carer requested information regarding support groups did you receive this? Yes No
4b if you requested your carer to be more involved in decision making about your health, has this now happened? Yes No
4c. if you requested information regarding your carers needs being met eg counselling, respite care, education, did you receive this? Yes No
If yes has your carer managed to get some support if required egg respite, counselling, education? Yes No

Quality Improvement Action Plan

Project Title:

Service/Ward/Team	Action Date	Action Required	Person(s) Responsible	Due Date	Action Status	Outcome/Changes in practice

Actions should be *Specific, Measurable, Achievable, Realistic and Timely*.