

RESEARCH TO IMPROVE THE QUALITY OF HEALTHCARE SERVICES

In the last year, society has become more aware of research drugs trials. Research trials that focus on improving health, care delivery, and patient experience are also important. Trials can be expensive and timeconsuming. So, researchers often test out trial processes on a smaller scale to make sure they can set up and run a good quality trial. These are called trial feasibility studies and are particularly important for non-drug trials. This document tells you about our feasibility trial and what we learned to help us run a larger trial.

OUR STUDY

Improving the safety and experiences of older people (aged 75 years+) as they go back home from hospital.



WHAT IS THE PROBLEM?

About 18% of patients are readmitted to hospital within 1 month of being discharged. About ½ of these readmissions relate to avoidable things like medication errors. The NHS recognise that patient involvement in care is essential, and that the views, ideas, and insights of patients and carers can give important information to improve their care and help them be safer.

HOW DID WE RESPOND TO THIS?

The research team interviewed many patients, carers, and staff to explore their experiences of receiving and giving care. We developed an approach (we call it an intervention) that helps patients and families be more involved in hospital care, so that they are better prepared for managing at home.

The intervention helps patients to know more and do more about:

- · Their health and wellbeing,
- · Their medicines,
- · Their daily activities such as moving around,
- · Care at home in the early days after hospital discharge.













WHAT IS THE INTERVENTION?

The intervention is called Your Care Needs You or YCNY! It includes a:

- · Patient Booklet,
- Short Patient Film,
- Patient Friendly Care Summary.



WHAT DID WE DO WITH YOUR CARE NEEDS YOU?

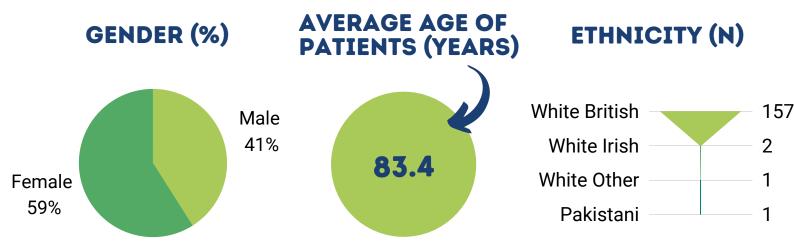
To work out if Your Care Needs You improves safety and experience for patients we need to do a trial. Before this, however, we need to work out:

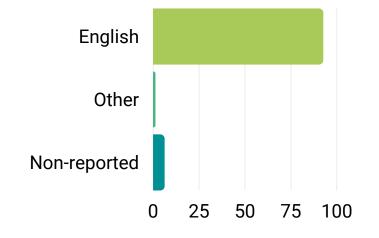
- · How to support ward staff to deliver the intervention in hospitals,
- What patients and staff think of the intervention if patients and staff don't like it then
 it won't be used,
- If enough patients will agree to take part in the trial over a short time,
- If enough patients return the questionnaires that we send them this allows us to measure the safety and experience of going home from hospital,
- How to get information from hospital systems so we can measure how often patients are admitted back to hospital.

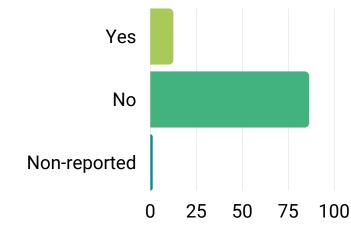
To answer these questions (and others) we carried out a feasibility trial on 9 wards across 3 hospitals in West Yorkshire. Different wards took part, including elderly care and cardiology. This allowed us to test our research plan to see if the trial could work on a bigger scale, and what we might need to do differently.



WHO TOOK PART IN THE STUDY?







FIRST LANGUAGE (%)

% OF PATIENTS LIVING WITH A CARER















WHAT WE FOUND

Sometimes, staff didn't know which patients to give the booklet to and needed support of senior staff to encourage them

Using posters and providing training to staff was valued

Most staff and patients liked the booklet and thought that it needed to be given at the right time. Patients need to be supported to use it

The patient film (approximately 5 minutes) was too long

Staff found the patient-friendly care summary took too long to complete, because they had to give information about each patient individually.

We recruited patients quickly but not as many people returned their questionnaires after discharge

We can easily get information to show how many people are readmitted to hospital

CHANGES FOR THE MAIN TRIAL

We will make sure that staff are clear on which patients will be involved in YCNY!

We will provide posters and remind staff about the booklet and the film

During staff training, we will guide them to identify how they can best support the use of the film and booklet based on patients individual needs

We cannot reduce the length of the film. During training, we will ask staff to tell patients that they can access the film at any point and take time to look through

We changed the patient-friendly care summary so that it is much easier to complete and reduces additional work for staff

We will recruit more patients into the trial so that we get enough questionnaires back to properly measure patient experience and safety outcomes

No further action needed