



FoNS Improvement Insights

Improving Patients' Experience of Transfer from the Adult Intensive Care Unit to the High Dependency Unit

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Project background

This adult intensive care unit (AICU) is situated in a specialist NHS Foundation Trust in Central London. The unit has 20 beds and cares for adults who have cardiothoracic illness and require intensive care. After attending a conference, members of the team began to think about the importance of communication and the project question 'How can we improve patients' experience of transfer from our AICU to the high dependency unit (HDU)?' was developed. The team decided to use experience-based co-design (EBCD) as a method to capture the experiences of staff, patients and their relatives of this transfer process.

Aim and objectives of the project

The aim of the project was to explore problems for patients and staff with the transfer process, to act on these problems and to implement solutions. To achieve this aim, the following objectives were identified. To:

- Capture the experiences of patients and staff during the transfer process from AICU by observing care and asking patients and staff to tell their stories about the transfer process
- Understand these experiences by using EBCD methods to plan identified improvements to the delivery of patient care
- Plan for sustainability of the improvements

Key activities and outcomes of the project

- Staff interviews

Twenty-seven members of AICU and HDU staff were interviewed about their experiences of the transfer process using a story telling approach. Less experienced members of staff were mentored to collect interviews by more experienced staff members, which enabled them to develop confidence in this method. Interviews were audio recorded and themed by the team using a thematic mapping sheet. The main themes arising from the staff interviews were: patient comfort; communication and information (with and for patients); communication and information (with and for relatives); handover on HDU; timing; lifts; meet and greet on HDU and transfer protocol.

- Staff event

The identified themes were presented at a staff event and discussed to establish whether they resonated with the group (n=17). Two additional themes, person centred care and equipment were added. Staff then voted for the most important in terms of the group's perception of patients' experience of

the transfer process and selected equipment, communication and information (with and for patients), communication and information (with and for relatives), person-centred care and timing.

- Observation of the patient transfer process

Staff went on to observe the transfer process from AICU to HDU for seven patients. Observation notes were taken from the time of notification of transfer until the patient was settled on HDU. All the observation notes were analysed by the team for common themes. These themes were used to develop the topic guide for the patient interviews which were carried out in the next stage.

- Patient interviews and patient event

Seven patient interviews were carried out by the team again using a story telling approach, giving the project team insight into their experiences. The key themes were identified and presented at a patient event where patients and family members were asked to attach an 'emotion word' to each theme. Many patients chose to use a phrase rather than a word and on reflection the team felt they should have used a prompt such as 'Evoke' cards. Patients then voted for the themes they wanted to take forward to the joint patient-staff event.

- Joint patient-staff co-design event

Patients and staff were invited to attend a co-design event to decide on the actions needed to improve the transfer process. The three top priorities identified were: communication between healthcare professionals and relatives; communication between doctors and patients; and communication between nurses and patients. Action groups were set up to establish clear objectives for improving communication in these contexts.

Following the event, action plans were finalised and implemented. The effectiveness of these actions will be evaluated during a patient event planned for October 2014 by capturing patients' and relatives' experiences of communication with healthcare professionals.

Implications for practice:

- Communication between healthcare professionals and patients and relatives is an important factor in patients' experience of care
- Supportive leadership to allow time out for 'project' work can contribute to the success of an innovation
- New techniques and approaches can be used by novice practice developers with support and mentorship from more experienced colleagues
- A systematic staged approach can enable staff and patients to work together to improve care

A full project report including references can be accessed from: <http://www.fons.org/library/report-details.aspx?nstd=55845>

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