

FoNS Improvement Insights

The Creation of a Single Multi-disciplinary Patient Assessment Tool for all Services within St. John's Hospice

Project leader: Helen B McInnes, Practice Development Nurse, St Johns Hospice, London

Duration of project: November 2011 – February 2013

Keywords: Assessment, multidisciplinary team, user involvement

Project background

St John's Hospice operates in partnership with health and social care providers, to offer specialist palliative and end of life care to people with progressive and life-limiting conditions. The hospice is funded in part by the NHS and in part by the independent Hospital of St. John and St. Elizabeth. The primary aims of the service are to improve end of life care for all, irrespective of diagnosis and to provide greater choice for people in their place of care and death. As a result of feedback in a staff satisfaction survey, the senior management team identified that there were issues with communication that had the potential to impact on patient care. The creation of a single admissions assessment tool to be used by all services in the hospice was recognised as a potential solution. To support the project a core project group (CPG) was formed that reflected the range of services and professional groups that make up the hospice.

Aim and objectives of the project

A project statement outlining the aim and objectives for the project, as well as agreement on what was expected of each CPG member was created by the CPG using a values clarification exercise. An excerpt from this statement is shown below:

As a core project group, we aspire to create a multidisciplinary assessment document that will be used throughout all services within St John's Hospice. We aim to improve patient care by reducing the need for unnecessary repeated assessments and by improving communication between services, patients, their family and carers through the use of shared, accessible documentation.

Key activities and outcomes of the project

A number of methods and approaches were used to facilitate the project in practice. These were:

• Staff focus groups

The CPG decided that it would be useful to hold a series of staff focus groups to determine the strengths and weaknesses of the current assessments on a practical level, asking what it was actually like to use the assessments in practice. The feedback emphasised the importance of creating a single assessment tool that would capture meaningful, necessary information in a timely manner.

Claims, concerns and issues exercise

The CPG meetings were becoming increasingly difficult for the

project lead to facilitate due to concerns of the members. The project lead invited the FoNS practice development facilitator to facilitate a claims, concerns and issues exercise (Guba and Lincoln, 1989). This enabled the CPG to focus on a number of issues: action planning and how this would be achieved throughout the project; gaining patient feedback on moving between services and the assessment process; how a new assessment tool and processes could be incorporated within the new IT system that the hospice was in the process of procuring; and engagement of the wider multidisciplinary team.

Patient feedback

Feedback was gathered on two separate issues: firstly, to informally gain the patient and carer perspective on the current assessment process and secondly, to gain the patient and carer perspective on moving between services within the hospice. The general consensus was that the hospice was seen as a whole by patients, rather than as isolated services. Fears that poor communication had led to a disjointed service were not evidenced by patients at this time.

· Launch and pilot of assessment

A sub-group of the CPG was created to write a first draft of the assessment, which was then shared with the CPG and developed further. The assessment was launched at a series of well-attended staff lunches and a pilot was planned to coincide with the new IT system going live. The pilot revealed that more work was needed relating to the process of completing the assessment. The project will continue with a documentation audit to identify whether all aspects of the assessment are useful and the collection of feedback from the staff piloting the assessment on their experiences of using it on a day-to-day basis. This will guide the introduction of the assessment into other areas.

Implications for practice:

- Using a values clarification exercise at the start of the project is a collaborative way of creating a project aim
- Using claims, concerns and issues can help a project group to focus on actions needed to move the project forward
- When working with new IT systems it is wise not to underestimate staff fears and concerns; it may be necessary to work with these concerns to move the project on
- External support can be invaluable to help a project to move on in a timely fashion; particularly when contextual issues feel overwhelming and cause frustration

A full project report including references can be accessed from: http://fons.org/library/report-details.aspx?nstid=45280
This project was supported by the FoNS Patients First Programme in partnership with The Burdett Trust for Nursing.