# AN Always Event® IN MRI

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#### Background

AlwaysEvents® were developed in the United States by the Picker Institute and is a quality improvement tool focused on patient experience (IHI, 2016). The methodology has been adopted by NHS England (NHSE) as part of the governments objective to 'ensure that patients, their families and carers are involved, through co-production, in defining what matters most in the quality of experience of services and assessing and improving the quality of NHS services' (Marshall, et al, 2019).

In contrast to a 'Never Event' commonly referred to in incident management terms, the concept of an AlwaysEvent® is based around something that should always happen in relation to patient experience. At the heart of this approach are patients and the concepts of co-design and co-production to ensure their involvement throughout (Marshall, et al, 2019). As part of our endeavour to continually improve the experience of having an MRI scan for our patients, the organisation signed up to developing an AlwaysEvent® and piloted this at a hospital based site.

# 1. Set up and Oversight

Executive sign off for support was given to the project. Members of the local team were identified to form the 'point of care team' to lead the event locally, and an 'oversight team' consisted of the departments registered manager and the organisations MRI Clinical Lead to help keep the project on track.

### 3. Vision and Aim Statements

Based on the feedback and identified areas for focusing the AlwaysEvent® on, the team developed an overarching Vision statement and supporting Aim statements in the voice of the patient. These were then reviewed by patients as part of the next round of surveying to see whether these made sense and fitted with what they had told us.

Vision
Statement:

I will always feel
welcomed on arrival,
fully informed and at
ease whilst waiting
for my scan.

yourney
waiting
by April 2

• 95% of
or strong
informed of
waiting for

#### Aims Statements:

 Average of 80% positive emotional journey responses for arrival and waiting (warm welcome) reported by April 2019

• 95% of patient will agree or strongly agree to being informed of next steps whilst waiting for their scan by April 2019

# APERIENCE AT INHEALTH MEANS.. ding great care to all service users, from referral to results, that is timely, informed and personal... always! Core to the principles of an Always Event® is co-production and the involvement of our patients in what we are doing. Following lots of feedback from patients locally we have identified the Warm Welcome as an area which patients have told us could be improved upon. By this we mean the attending and waiting for a scan. Suggested realistic change ideas which have been made by patients and staff are: Change ides Wotting Improved signage outside Olearer directions along the corridor and an identifiable door to the unit Photo of the building entrance on the appointment letter. \*\*Tore information given on phone bookings\*\* \*\*In reception\*\* \*\*In reception\*\* In reception\*\* In reception\*\*





Area Identified	Outcome
Clearer direction     to department	Improved signage along the corridor from the building entrance with pop up banners
Information on notice boards	Purchased and displayed in the waiting area containing information on having a scan and useful resources
Information on delays     and appointment times	Notices designed and on display showing who is on shift that day and whether there are delays to scan times
Ambience of waiting room	A local photographer provided a choice of local photos on which patients voted for their preference and the final 3 were printed and displayed
5. Free WiFi	Under discussion with IT
6. Hot drinks in reception	Discussed with patient representative and decided not to pursue

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#### 5. Interventions

To decide which areas of the 'Warm Welcome' to focus efforts on, patients were asked to vote whilst waiting for their scan. The outcomes were those around making for a more

informed and thoughtful wait...





# 2. What Matters to Patients Locally

The first step was to identify areas for improvement. Reviewing local feedback from Friends and Family tests (FFT) provided limited insight into areas for improvement with the department averaging 98.3%. The complaints rate was also low and so a survey was used to engage with local users of the MRI service to better understand what mattered to them when attending the department for a scan. The initial survey again proved limited in value and so a further survey was conducted asking them to rate their emotional journey as they attend and go through the process of having their scan.

The results of this showed that emotionally their journey started off particularly low when arriving and waiting, improving as they proceeded through their journey with us – see progress chart below. Along with comments, this therefore demonstrated the need to improve the 'Warm Welcome' for patients attending for scan. This was further supported by conducting a 15-step challenge (NHS England, 2017) with our Director of Clinical Quality and an observational report by the Patient Experience Network (PEN) – both of which further reinforced this as being an area for clear improvement and of benefit to our patients.



Process Measures

- to check any
actual interventions are
working:

15-step challenge and
regular observation
(beginning, throughout
and in April).

#### 4. Measures

Three sets of measures were used throughout the project;

Balanced
Measures – to
check no adverse
effects as a result of the
changes:
Staff engagement survey
(beginning, Feb and April)
Conversation with staff
(throughout)

Outcome
Measures – to
check the changes
are actually providing
improvement:
Patient survey beginning,
Jan, Mar and Apr,
continued 3 monthly for
maintenance.

## 6. Progress so far...

The final measure to meet the aims for April 2019 had to be delayed due to issues with implementing some of the waiting room changes. However, the interim measure in Feb 2019 showed progress was being made in terms of the warm welcome when attending and waiting for their scans. The responses on agreement on being an informed wait showed some decline, although the sample size was smaller and not all waiting room interventions had been completed at that time. Interestingly the dip in emotional state experienced at scanning was more evident...

#### Patient Involvement

One of the challenges faced was the brief time that is spent with our patients making it more difficult to build rapport and engage with them in a meaningful way.

We therefore had to rely on surveys and voting polls to maximise engagement which potentially has limited the level of co-production possible. We managed to engage one member of the hospital patient group to attend the department and provide some invaluable feedback on the work that was being conducted. So far almost *100 patients and service users* have been surveyed as to what matters to them when coming to Eastbourne for an MRI, and their emotional journey has been recorded.

#### Conclusion

The ongoing AlwaysEvent® shows the potential for improvement based on what is important to patients locally. There are challenges with obtaining patient engagement within this environment where contact time is short, but this was achieved through differing approaches for capturing input.

Whilst initially the feedback confirmed much of what we knew and supported the good FFT scores and feedback normally given to site, still some great areas for real positive improvement have been developed and implemented with support from patients.

#### Next steps

...to perform the final measure to evidence desired improvement and attainment of the aims statements, sustain the changes implemented within the department, and share the learnings across the organisation.

#### PATIENT EXPERIENCE AT INHEALTH MEANS...

referral to results, that is timely, informed and personal... always!

#### INHEALTH MAKING HEALTHCARE BETTER



#### References

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