NHS Wales national learning event:
Making sense of prudent healthcare

Thursday 12 June 2014 – Venue Cymru, Llandudno

Organised by NHS Wales & 1000 Lives Improvement #1000lives

www.1000livesplus.wales.nhs.uk/nle-jun14

www.1000livesplus.wales.nhs.uk/prudent-healthcare

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8.20am   **5x5 Prudent Healthcare Insights**
Join five NHS Wales staff as they share the progress they have been making to apply prudent healthcare principles and the difference it's making to their patients and work.

9.15 am   **Welcome and launch of 'Achieving Prudent Healthcare in NHS Wales'**
Dr Alan Willson, Director, 1000 Lives Improvement

9.30 am   **Making Sense of Prudent Healthcare**
Professor Marcus Longley and Dr Tony Calland will share the Bevan Commission's role in developing the prudent healthcare principles and showcase the work undertaken across Wales under the banner of prudent healthcare.

10.15 am   **Healthcare that fits the needs of patients?**
Attendees identify the opportunities and challenges to taking forward prudent healthcare at a national and local level.

11.10 am   **Applying the principles**

1.15 pm   **The Year of Prudent Healthcare**
Simon Dean, Deputy Chief Executive NHS Wales, will introduce a video message from the Health Minister, Mark Drakeford, who will share his reflections on work to date and set a challenge for organisations to address in their breakout sessions.

1.30 pm   **How are you and your organisation delivering prudent healthcare?**
Participants join breakout sessions with their organisation, an opportunity to share information, generate ideas and test thinking

3.00 pm   **Hello my name is...**
Dr Kate Granger, founder of the 'Hello my name is...' Twitter campaign, will challenge all NHS Wales staff to introduce themselves to every patient they care for.

3.15 pm   **Measuring what matters – how can we know we are delivering prudent healthcare?**
Professor Mary Dixon-Woods, Professor of Medical Sociology at the University of Leicester will outline the approaches needed by health boards and trusts to balance demands for assurance and improvement.

3.55 pm   **Closing Remarks Dr Alan Willson, Director, 1000 Lives Improvement**

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INTRODUCTION

It was great to welcome staff from across Wales for our recent National Learning Event on Thursday 12th June.

The theme for the day was Making Sense of Prudent Healthcare, and supported the publication of "Achieving prudent healthcare in NHS Wales", a new paper from 1000 Lives Improvement.

The programme focused on how the three key prudent healthcare principles outlined in the paper were developed, and showcased the work undertaken across Wales under the banner of prudent healthcare.

We were delighted to welcome Professor Mary Dixon-Woods, Professor of Medical Sociology at the University of Leicester, who outlined the approaches needed by health boards and trusts to balance demands for assurance and improvement.
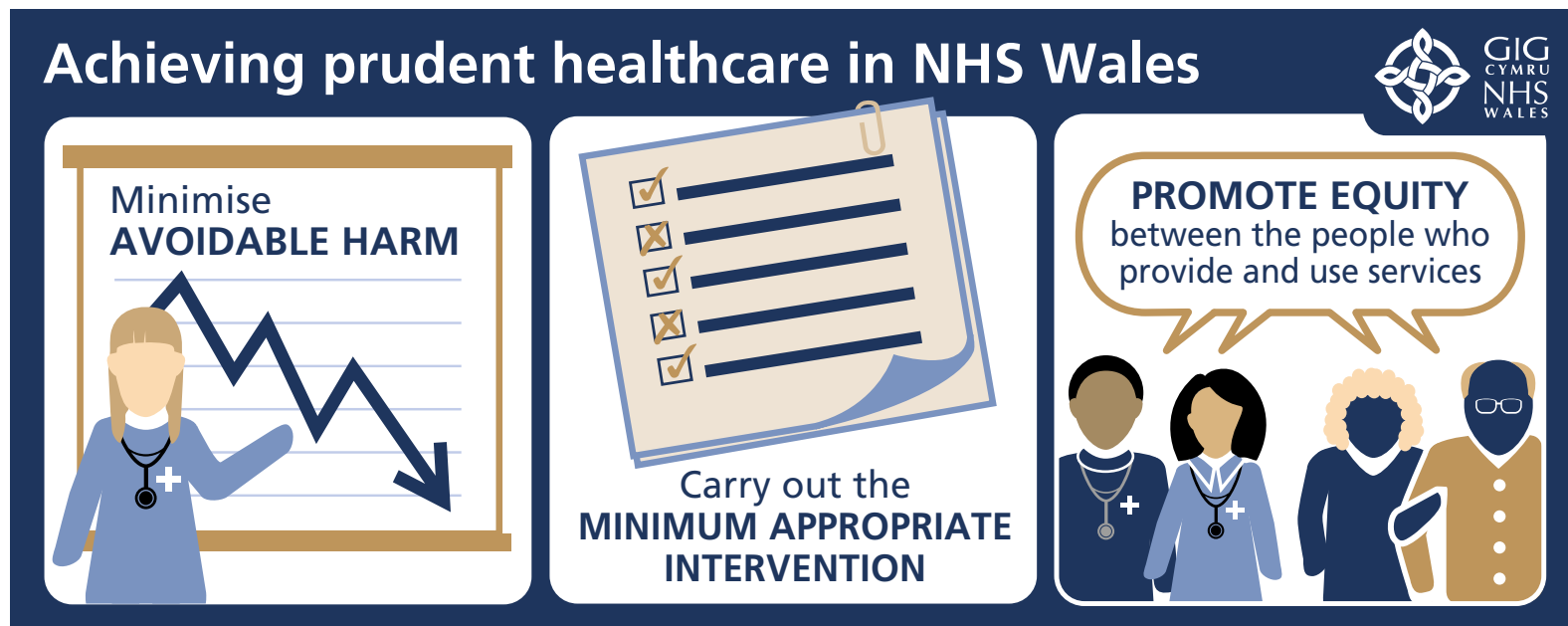
Mary challenged organisations to measure what really matters in delivering - and improving - care, and reinforced the role of both data and soft intelligence to deliver prudent healthcare.

The presentations from the day and storyboards which share organisation's progress across the programme areas are now available online.

Throughout the event participants were asked to actively contribute to discussions and text questions. Over 740 reponses have been recorded, with these being synthesised, with the key responses and themes being presented in this report.

Dr. Alan Willson
Director, 1000 Lives Improvement

Achieving prudent healthcare in NHS Wales

Minimise **AVOIDABLE HARM**

Carry out the **MINIMUM APPROPRIATE INTERVENTION**

PROMOTE EQUITY between the people who provide and use services

GIG CYMRU NHS WALES

Defining prudent healthcare

The audience were 200 NHS staff and healthcare students, with all 10 NHS Wales organisations represented. The delegates were asked to text their responses to the question:

'What do you know about prudent healthcare?'

Their responses were segmented into 4 areas and used to create the data graph below.
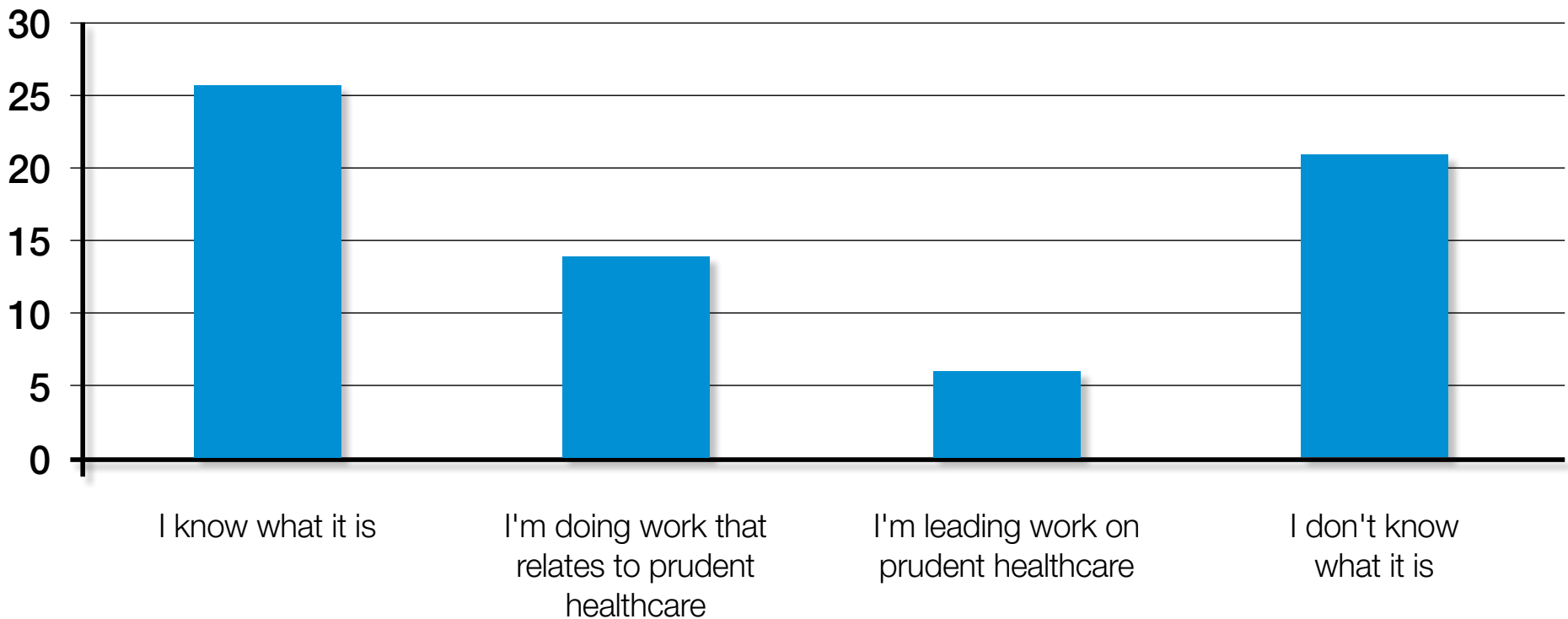
| | I know what it is | I'm doing work that relates to prudent healthcare | I'm leading work on prudent healthcare | I don't know what it is |

NHS Wales national learning event: Making sense of prudent healthcare

World Café - Discussion Key table feedback

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Discussion 1: World Cafe Session - Defining prudent healthcare

"Healthcare that fits the needs and circumstances of patients and actively avoids {wasteful} care that is not to the patient's benefit." Welsh NHS Confederation Conference; 16th January 2014.

Question: How well does this define prudent healthcare in your view? Is there anything to add/change or remove?

Key themes/phrases from the participant reponse flipcharts:

- Not patients, citizens?
- Equal conversations between citizen and clinician
- Patient led care
- Needs of the patient 1st
- Do no harm
- Minimise risk
- Language needs to simpler for everyone to understand
- Need to reflect health and well being
- Doing the right thing
- Evidence based
- Greater shared decision making
- Need for realistic expectations
- How do we remove barriers
- Increase focus on keeping people well
- Too medical, should be about people not patients
- Togetherness should be promoted!
- Help people achieve their expectations not perfection

"...translate the definition so it is meaningful to the public in first instance and staff as well."

"...Prudent healthcare is about co-creating health."

medical barriers Equal 1st keeping remove patient achieve care making everyone reflect led citizen based well help expectations people conversations realistic citizens focus understand decision

patients greater Need simpler perfection needs thing clinician

shared increase evidence risk Language right harm health promoted minimise

A wordle 'word cloud' generated identifying the
words used most frequently in the delegates'
World Café flipchart responses.

Discussion 2: World Cafe Session - What do we need to deliver prudent healthcare?

Key themes/phrases from the participant reponse flipcharts:

- Collaborative working
- Belief ownership communication collaboration
- Individualised patient care
- Need patient perspective
- Communication is key.
- Respect contribution of all parties
- Empowering and involving patients in decision-making
- Need a clear pathway – integration between services
- Consistent approach for Wales
- Need common language for clinicians and citizens
- Changing organisational structure
- Breakdown of barriers
- Training
- Co-operation and collaboration
- True contribution of patients and public
- IT systems, Data, Evidence
- Improved communication is the key underpinning factor

"...measure what matters not what can be counted."

"...Leadership from the top, as well as local leadership."

structure involving barriers parties language pathway Individualised Data breakdown clinicians working belief patients Collaboration key Need patient ownership citizens Wales contribution approach services consistent need systems Training integration perspective public organisational Improved factor Evidence Changing Empowering underpinning Co-operation True communication common Respect clear care decision-making Collaborative PAGE 10

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World Café flipchart responses.
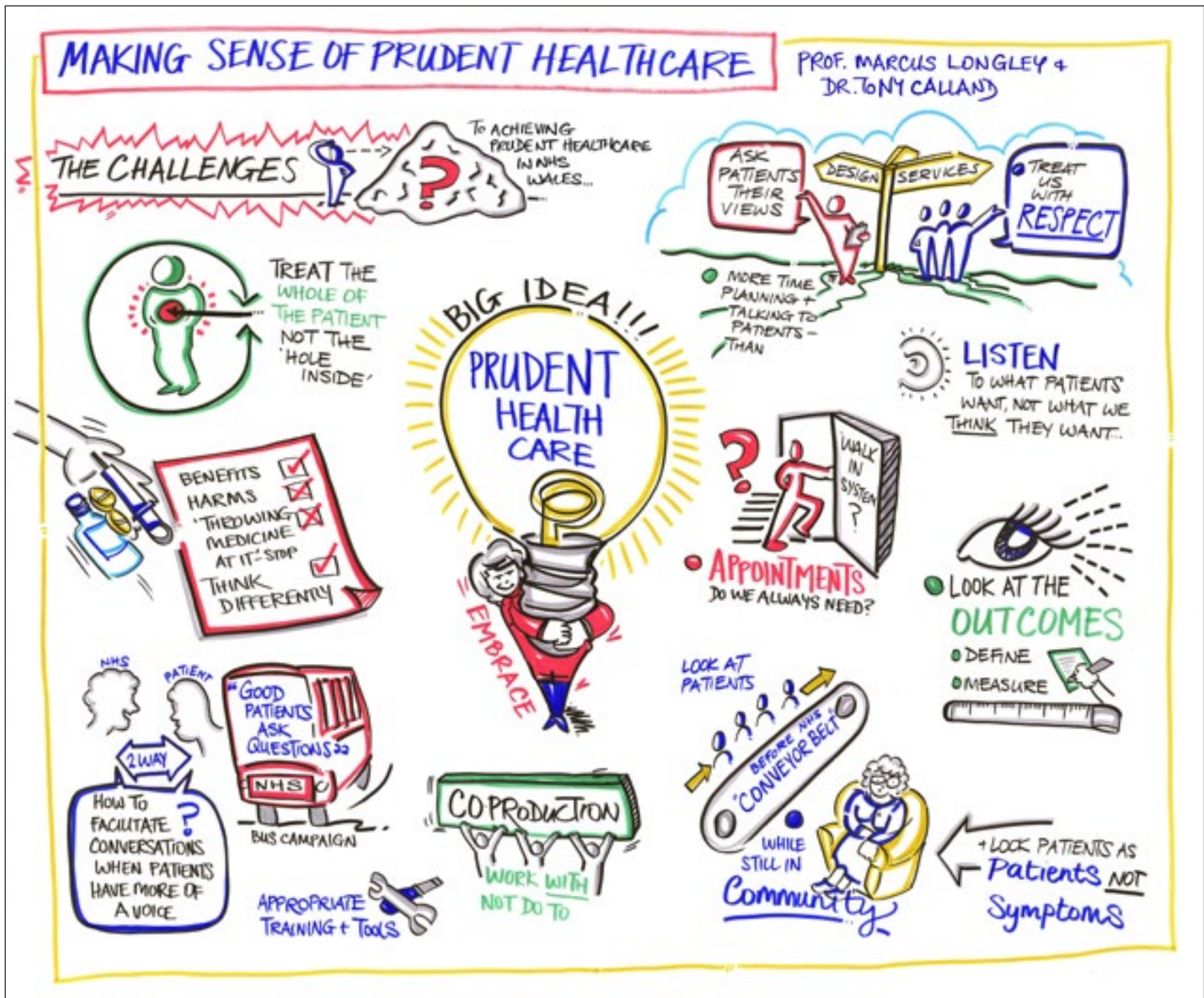
Discussion 3: Where can prudent healthcare make the biggest impact in your organisation?

Participants joined breakout sessions with their organisation to share information, generate ideas and test thinking. The key themes are shown here:

- Follow up pathways and protocols
- Use of blood components
- Modern technology
- Primary care – break down barriers to shared care
- Increase patient contact in the process
- Early intervention in psychosis
- Chronic conditions
- Medicines related admissions
- Addressing lifestyle risk factors
- Vaccination and screening
- Early presentation
- Dementia
- Falls prevention
- Patient Flow
- Frality
- Cardiology
- Admission – discharges – transfers
- Re-design of Community care
- Medicines management – 'missed doses'
- Primary Care

"The patient is transported to the appropriate healthcare environment."

"Ensure that the clinical need of the patient is reflective of the clinician attending."

missed
barriers related Flow Patient Medicines
Increase Chronic patient
Vaccination Care Addressing care Follow Admission
break shared Primary Re-design psychosis
doses discharges Falls
Community technology Use Early
components management
risk pathways prevention Frality Dementia process presentation
intervention screening factors Cardiology
protocols contact
conditions Modern blood
lifestyle
transfers

A wordle 'word cloud' generated identifying the
words used most frequently in the delegates'
responses.

Discussion 4: What support is needed in your organisation to apply the principles in the agreed high impact area?

Organisations were asked to identify areas they may need support in to develop prudent healthcare. These are a few key themes that emerged:

- Cancer plan
- Job swap?
- Winning hearts and minds – shared understanding
- Skills and knowledge and training
- Clarity of what are appropriate options
- Patient involvement
- Shared decision making
- Diabetes management
- IT infrastructure.
- A unified language among all care providers
- Improving quality together
- Improve communication
- Leadership throughout
- Reallocation of budget
- Commission services consistency and appropriately
- Board development
- Commitment to prudent healthcare
- Embedding IQT to support PDSA methodology into the Trust
- Agree and disseminate appropriate KPI's
- Workforce redesign
- 'Backfill' – imaginative
- Co-ordination of services
- 'what matters'
- Co-coordination of care - single point of contact

"Gathering the patient experiences in a more pragmatic way because patient engagement is hard."

"We need to ensure all the public conversations are brought together in a way the public can understand."

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A wordle 'word cloud' generated identifying the words used most frequently in the delegates' responses.

MAKING SENSE OF PRUDENT HEALTHCARE

MARK DRAKEFORD HEALTH MINISTER, WELSH GOVERNMENT

UNDERPIN THE WORK OF NHS WALES

USE THESE TO → BRING CHANGE

PRUDENT HEALTHCARE PRINCIPLES
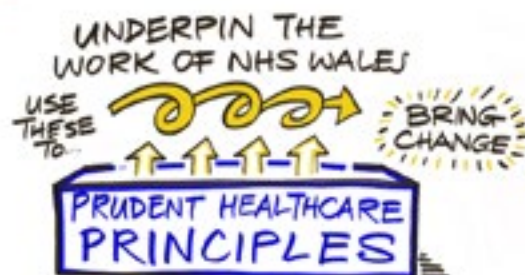
1. MINIMISE AVOIDABLE HARM.
2. CARRY OUT THE MINIMUM APPROPRIATE INTERVENTION.
3. PROMOTE EQUITY BETWEEN THE PEOPLE WHO PROVIDE AND USE SERVICES.

FOR PATIENTS

WE WANT TO CONTRIBUTE

REMOVE BARRIERS

THIS IS AN OPPORTUNITY FOR IMPROVEMENT

CO-PRODUCTION — THE WAY FORWARDS

IT WILL BE MUCH STRONGER — IF WE APPLY THESE PRINCIPLES IN OUR PRACTICE

WELSH GOV. REVIEWING TARGETS

WE ARE AHEAD OF THE WAVE

IMPROVEMENT

GLOBALLY NHS IN WALES IS ENVIED

PROF MARY DIXON-WOODS — MEASURING WHAT MATTERS

MEASURING IS A CHALLENGE

DATA

- MEASURING IS NOT JUST ABOUT WHAT'S HAPPENED
- USE THE EVIDENCE
- PRIORITY, SIGNAL, ACTION, CHANGE OF BEHAVIOUR, SELF GOVERNANCE

WE HAVE TOO MANY PRIORITIES

MEASURE WHAT IS IMPORTANT!

SO YOU CAN SEE EVIDENCE "RIGHT ONE, NOT "BLINDED

YOU CAN'T SORT ALL THE PROBLEMS DOING P.D.S.A.

LEARN FROM OTHER SECTORS

IF YOU ARE NOT MEASURING YOU'RE NOT MANAGING YOU NEED TO SEE ALL PARTS OF THE PUZZLE. THEN SHARE YOUR LEARNING

DATA STORIES

BAD PROCESSES ARE EXHAUSTING

LOOKING FOR RIGHT DATA - TAKES SO MUCH TIME!!!

WE NEED MULTIPLE WAYS TO SENSE PROBLEMS

HARDEST NUT TO CRACK... DEFINING

ORGANISATIONS HAVE DARK SPOTS + BRIGHT SPOTS

Discussion 5: What support do you need to personally apply the principles of prudent healthcare?

**Delegates were asked to identify areas they may need support in to develop prudent healthcare.
These are a few key themes that emerged:**

- Time
- Education
- More autonomy, reduce the hierarchy
- Reduce bureaucracy in the Trust
- Understanding of lean methodology/measurement
- Autonomy to make decisions on what needs to change
- IT support
- Prudent toolkit – common language
- Workable proposals
- Momentum
- Board and Executive commitment to prioritise this
- Improvement skills
- Elements central to imp
- Empower staff
- Enabling staff to make changes
- Headspace
- Fast – direct-training / space for teams
- Team approach sharing the vision
- Willingness to not always have evidence
- Clear outcomes/Information
- Stop "protectionist" of roles
- Data Analysist Support
- Better patient feedback
- Phc to be properly rolled out as everybody's business
- WG support for innovation
- More meaningful engagement with pts/carer to id what matters as an outcome

"Leadership and message from the top – consistent message."

"A clear methodology to start the difficult "conversations" with the public."

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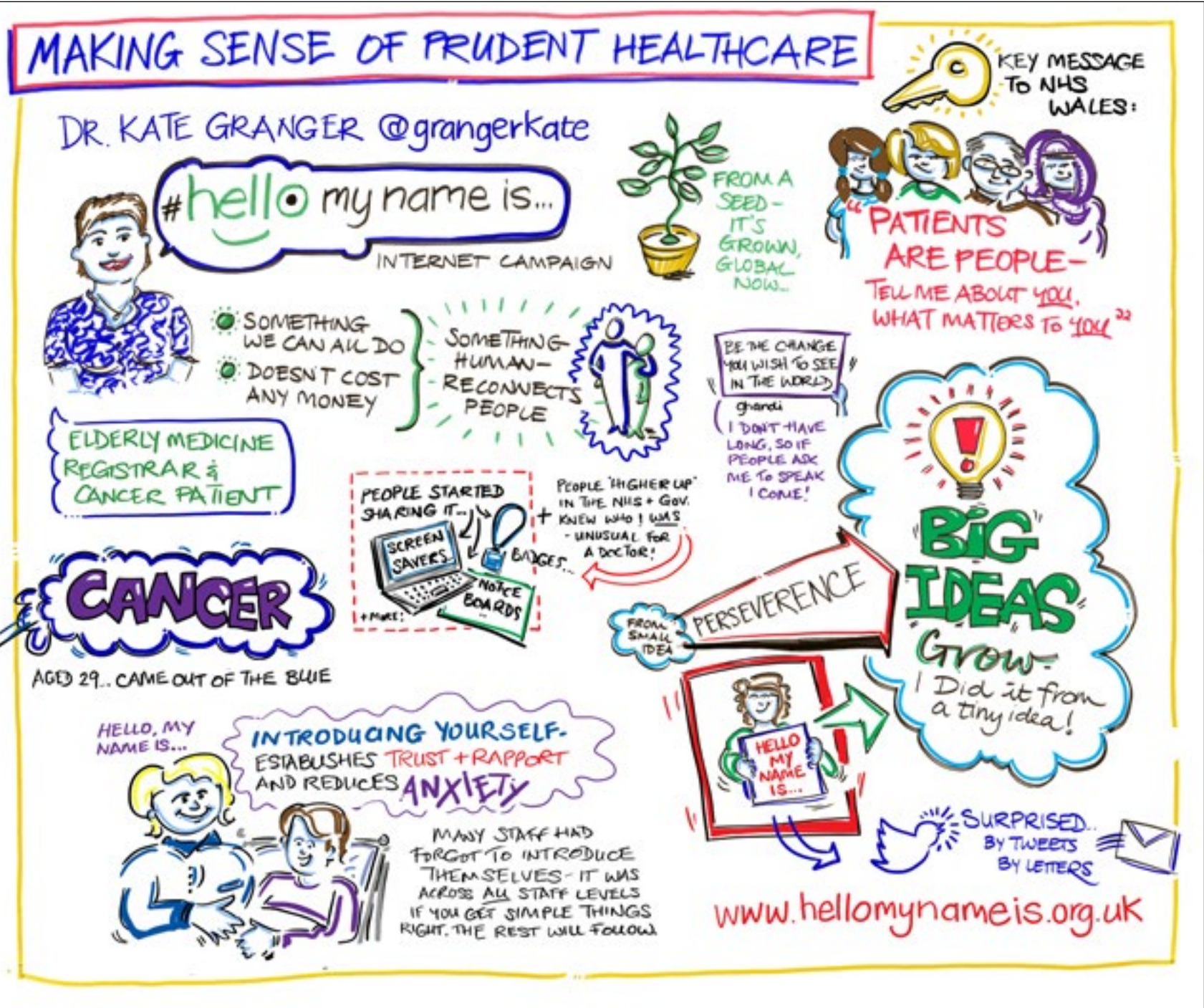
References: Video reports of the four workshops

Video reports on the four workshops were created for the event, and aired during the opening plenary. These videos are available online at: www.1000livesplus.wales.nhs.uk/prudent-healthcare

All the resources from the workshops are available online at www.1000livesplus.wales.nhs.uk/prudent-healthcare-workshops

A video interview with the Health Minister, Professor Mark Drakeford AM, was screened during the opening afternoon plenary.

A video report of the day, featuring key contributors to the agenda has also been produced.

Abertawe Bro Morgannwg University Health Board - Prudent healthcare in Ear, Nose & Throat Services

Aneurin Bevan University Health Board - Prudent healthcare in Orthopaedics

Cardiff & Vale University Health Board - Prudent healthcare in Chronic Pain Services

Cwm Taf University Health Board - Prudent healthcare in Prescribing and Medicines Management

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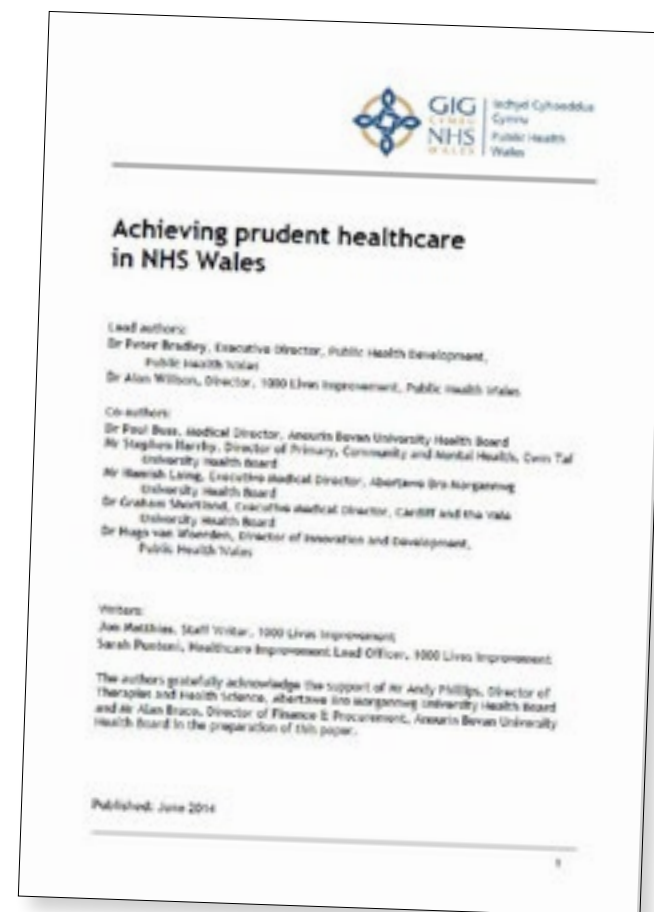## Making sense of prudent healthcare

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Containing reports of workshops held to explore applying prudent healthcare principles in Wales.

www.1000livesplus.wales.nhs.uk/nle-jun14

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