Conference Abstract

Testing the application of a research and design process to support development of care service design for frail populations in North West England

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Abstract

Introduction: Advancing Quality Alliance (AQuA) is a North West quality and safety membership organisation. During 2014, AQuA co-designed a frailty research and design (R and D) initiative with 5 member organisations. The purpose of this work was to test small examples of change using the Institute Health Innovation (IHI) 90 day R and D process over a 9 month period.

Description: The sites who applied to be involved in this initiative were predominately acute hospital providers with integrated community services. The sites were asked to:
•Choose any specific project topic or change as long as it was for a frail population
• Commit to testing small changes using the IHI 90 day R and D process methodology (Day 0-30 scan the evidence, day 31-60 focus and move from theory to practice, day 61-90 summarise and disseminate)
• Share learning with the other test sites and the wider AQuA frailty network
• Evaluate the work being undertaken and advise on sustainability and transferability
Chosen team topics include:
• Implementing early supported discharge
• Testing discharge to assess models
• Identification of frail patients and implications on care pathway
• Reducing length of stay for patients on acute frailty units
• Understanding bed flow for frail elderly patients
• Engagement with primary care to avoid unnecessary hospital admissions for older people
• How to improve assessment and discharge for frail elderly patients

Aim and theory change: The aim of this work was to find innovative ways to improve services for frail older people, whilst testing the IHI R and D 90 day process change approach.

Targeted population and stakeholders: Targeted populations include the frail elderly, their families, carers and staff working with this population.

Timeline: This project was designed to run from 1st July 2014 until 31st March 2015, covering three 90 day R and D cycles. Teams shared their learning from cycle 1 in September 2014, with other events planned.

Conclusions: (Key findings, highlights, sustainability and transferability) This work is in its infancy and more findings will be available later in the year. Below outlines conclusions so far:

Key findings:
• There is a huge appetite to work on projects around the frailty agenda
• Some teams have struggled with the concept of small test of change as they are used to working on large scale change projects
• Patient experience has been a key theme underpinning projects i.e. the role of the patient and family around care delivery
Highlights:
• Teams have all chosen different project areas which will provide a breadth of learning
• Opportunities for sites to develop clinical leadership and quality improvement knowledge
• Teams valued the opportunity to test small cycles of change in a safe environment
Sustainability:
• Projects are led by the clinical teams and are being embedded into daily practice based on the impact of the change
Transferability:
• The topics teams are working on are applicable to all services working with frail populations

Discussions: A learning network has been created to share and spread good practice from a project that is responsive to individual need and operational priorities.

Lessons learnt: The learning, networking and sharing of good practice has been valuable for the teams. During the initiative, sites have particularly benefitted from the research element of the R and D process as improvement projects don't always include this. However, the R and D process is not easily applied to all types of projects.

Keywords

frail; research and design; innovation; patient experience; older people

References

1. Institute for Healthcare Improvement 90-Day Innovation Process. Available from:
http://www.ihi.org/about/Documents/IHI%20Innovation%20Summary.pdf

PowerPoint presentation

http://integratedcarefoundation.org/resource/icic15-presentations