

INNOVATIVE PATIENT INVOLVEMENT

- increased patient involvement via employee-driven innovation

WHAT? Innovative patient involvement seeks to develop a toolbox to understand, select and develop the areas that patients and next-of-kin regard as central. This includes skills development to enable employee to gather and transform patient needs into innovative solutions on their wards – even when things are hectic.

WHO? Innovative patient involvement takes as its starting point two breast surgery wards at Herlev Hospital and Ringsted Hospital respectively. The Healthcare Innovation Centre (the project owner), The Danish Cancer Society and the Unit of Patient-Perceived Quality participate as process facilitators in a training process in patient involvement and employee-driven innovation for employees from the two wards. The project is supported by the National Agency for Enterprise and Construction and runs from April 2010 to December 2011.

HOW? Innovative patient involvement uses a number of methods to create even better conditions on the two breast surgery wards. Below are photos and journals, various interview techniques, idea development and prioritisation methods as well as the Plan-Do-Study-Act circle (PDSA circle) for testing and implementation. Herlev Hospital has chosen to focus on the patients' perception of their first out-patient visit, while at Ringsted Hospital, involving and supporting the next-of-kin is central.

WHY? Breast cancer is the most common form of cancer, and each year, almost 4,000 women are diagnosed with breast cancer. At the same time, the hospital sector is subject to efficiency-enhancing requirements, and patients want more of an individual care pathway. As well as making workplaces better suited to cope with increasing external demands, employee-driven innovation has been shown to boost employee satisfaction and facilitate implementation of changes in practice.

” We want to involve patients along the way in the care pathway they are in and use methods that give a balanced picture of patient perceptions. This way, the patients' perspective can be used more effectively in planning treatment, ultimately improving patient perceptions of quality.

Lotte Johnsen, Training and Quality coordinator, Breast Surgery Ward, Herlev Hospital – and co-initiator of the project

” Cancer also affects the next-of-kin, so it is important to focus on this group in order to obtain a more holistic breast cancer treatment process within the family.

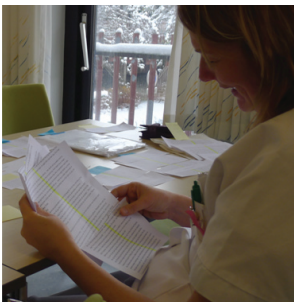
Hanne Jacobsen, Head Senior Nurse, Breast Surgery Ward, Ringsted Hospital

CONTACT

Project holder
Healthcare Innovation Centre
The Capital Region of Denmark

Susie A. Ruff
Director
susie.ruff@regionh.dk
tlf: +45 40839637

Anne-Marie Christina Thoft
Project Manager
thoft@regionh.dk
tlf: +45 24785437



PROJECT ESTABLISHMENT AND BASELINE

- Project establishment & 1 kick-off workshop for all participants
- Research into best practice for employee-driven innovation and patient involvement
- Baseline measurement (quantitative pre-point measurement in order to be able to measure the effects of the project)
- 1 workshop on innovation management for the department management

PATIENT INVOLVEMENT

- 1 training workshop for each of the two wards in the use of photo and text journals and interview techniques
- Distribution of journals to patients and next-of-kin
- Collection and processing of 11 photo & 7 text journals in connection with 11 depth interviews and two focus group interviews
- 1 joint evaluation meeting about the methods

DEVELOPMENT AND SELECTION OF IDEAS

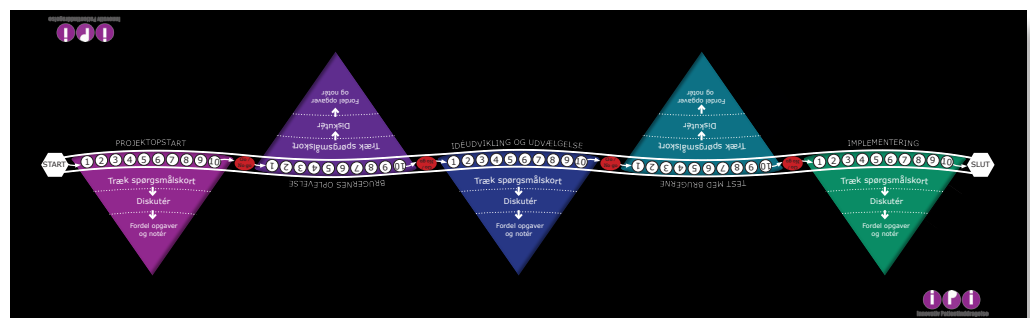
- 1 joint training workshop in development and prioritisation of ideas
- 3 cross-disciplinary idea development workshops lasting 2 hours each, a Ringsted Hospital, facilitated by the employees
- 1 large cross-disciplinary idea development workshop on a theme day for the whole ward at Herlev Hospital lasting 7 hours, facilitated by employees and innovation consultants
- 1 prioritisation meeting with management and the project group at Herlev Hospital
- 2 prioritisation meetings with management and the project group at Ringsted Hospital
- 4 selected ideas for each ward for ongoing work
- 1 joint evaluation of the methods

TESTING AND IMPLEMENTATION

- Appointment of 4 working groups on each ward. 1 working group for each of the four selected ideas per ward
- 1 training workshop in the PDSA circle for all working groups
- Follow-up meetings of PDSA circles on both wards
- Implementation of ideas initiated

COMMUNICATION OF RESULTS

- Baseline measurement (quantitative post-point measurement)
- Gathering experience in the form of a process tool for patient involvement and employee-driven innovation
- 1 seminar on employee-driven innovation and patient involvement on 4 November 2011 with 250 participants
- Publication of articles in various journals and newsletters



Process tool developed on the basis of the experience gained in the project; to be used on other hospital wards that want to work with patient involvement and employee-driven innovation