RCPCH QI Diabetes Collaborative: Improving the Clinic Experience



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Introduction: In recent years Gloucestershire Paediatric Diabetes Team have implemented a number of changes to develop our service, such as carbohydrate counting from diagnosis, high HbA1c meetings, annual review clinics, team meetings, quarterly patient newsletter, parents' evening, PGL camp and family events. These interventions have helped to improve patient outcomes.

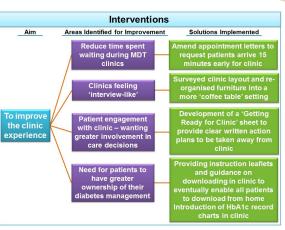


As part of the RCPCH Quality Improvement programme, we wanted to focus on making our service more patient-centred and improve patient engagement.

Aim: To improve the clinic experience for patients, their families and staff, based on their own input, thereby encouraging greater engagement and patient attendance. To this end we surveyed patients, families and staff to ascertain what they felt were the main areas for improvement. From this emerged our

Interventions.





Methodology Mapped current clinic process & our 'perfect clinic' Surveyed Patients, Families and Staff 00000 Identified main areas for improvement Held team discussions to identify solutions Formed working groups for four main interventions **Piloted solutions** Gathered feedback Discarded untenable solutions Re-grouped to improve and implement well-received solutions Analyse and improve service as an ongoing approach to continually develop our work

> Results: The amendments to our appointment letters will take time to show any effect due to the nature of our clinics being 3 monthly, however, once suitable time has elapsed we will once more analyse the wait times for each part of the clinic experience and compare this data.

> Having implemented and improved our interventions we surveyed patients'/families' opinions using a smiley face scale. Initial results indicate that our interventions have been very well received. Responses to the changes in clinic furniture layout were 88% positive, 12% neutral & none were

Similarly, our 'Getting Ready for Clinic' sheet yielded 94% positive responses, 6% neutral and no negative responses, with comments such as, "It let us have a voice in the clinic". Verbal/written feedback indicates that patients/families feel "highly motivated" by the HbA1c log charts in clinic.

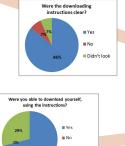


Diasend downloading instruction in clinic was found to be valuable and 72% of those surveyed indicated that they would now be happy to download at home, with some indicating that knowing they would need to download in clinic would encourage them to do it at home prior to clinic. Diasend will send us reports so that we can monitor changes in the way our patients download.

Whilst direct attribution is difficult due to the presence of other variables in patients' lives, we have also begun recording monthly clinic HbA1c averages in a graph, to monitor any potential impact of our









Hillinadon Hospital NHS Trust's



Conclusion: By listening to patients, families and staff, we have been able to improve the patient experience in the clinic setting. In addition to numerical data, verbal and written feedback has shown families and children are engaging to a greater extent and becoming involved in their diabetes management. They are more relaxed and have found their voice. The project has enabled us to improve our team working through increased frequency and quality of communication and more effective time management in meetings.

The Future: We have a number of further projects in development, such as tracking HbA1c levels, use of new technology and improving diabetes education. We are a pro-active team and our QI experience has provided a fantastic opportunity to share ideas and service improvements with other motivated Trusts; our thanks to all involved, especially the families and children who have joined us on this journey!