
Embedding standards for patients and professionals

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31 October 2016

Edinburgh



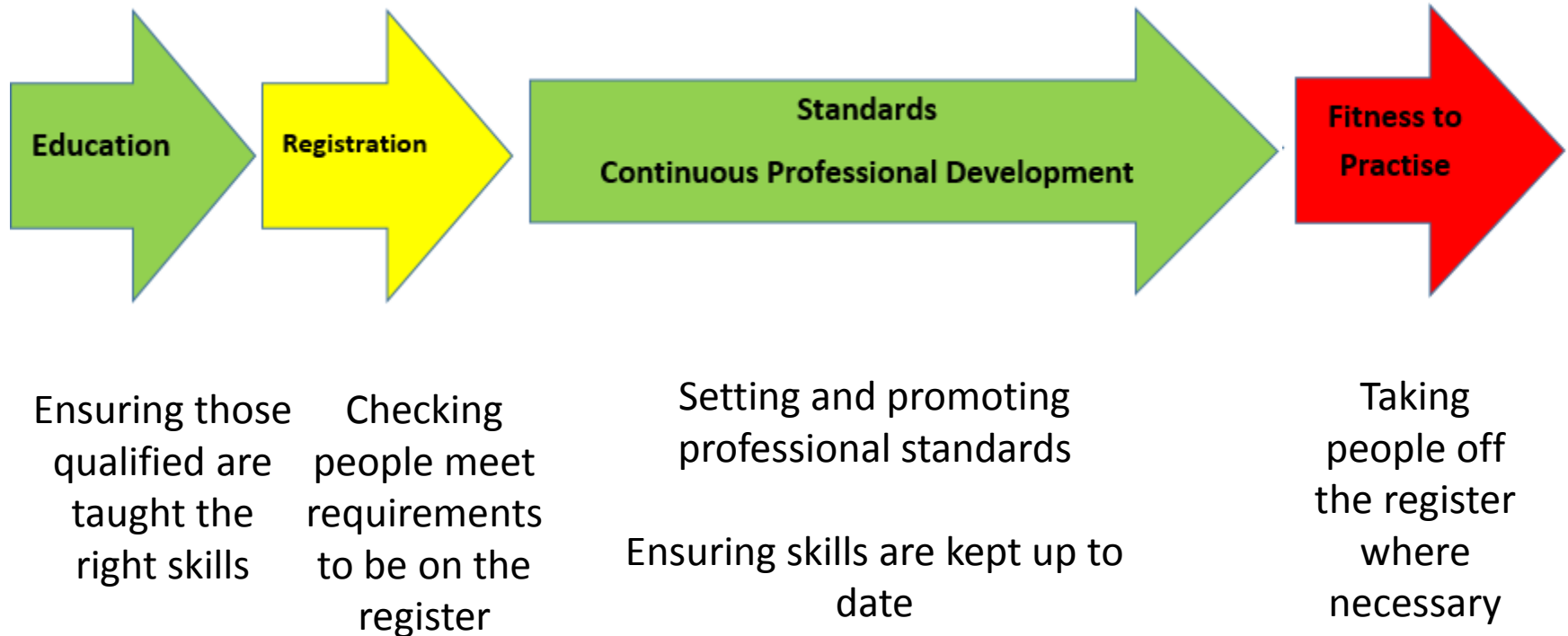
Aims of session

- How regulation contributes to patient safety and the enhancement of care by embedding standards for patients and professionals
- This presentation will:
 - Set context
 - Explore good care and a case study
 - Explain the relationship to our current work
 - Facilitate reflection on findings in relation to your own practice



Model of regulation

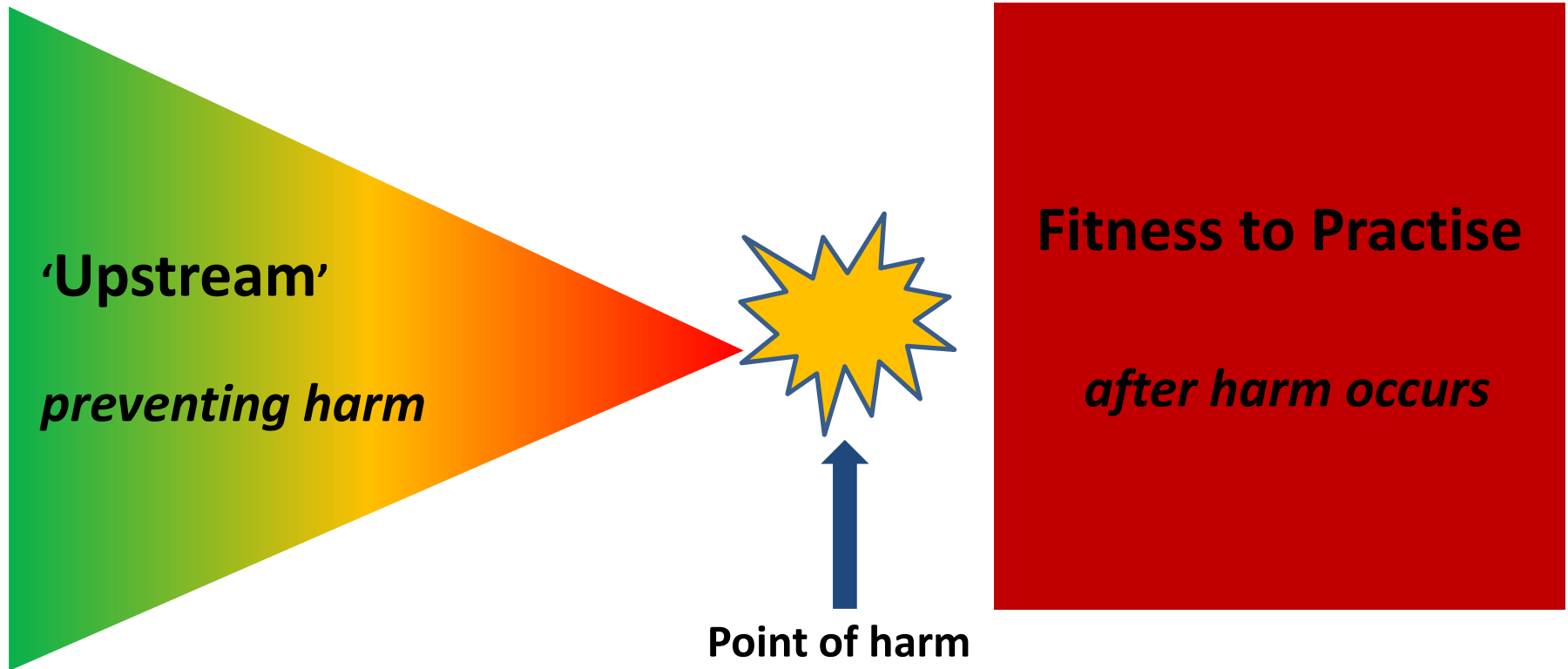
Four components of regulation:



What do we think is the problem?

- Regulation framed by social and professional institution and norms (Black and Baldwin 2010) and behaviour influenced by external factors with regulation some way down the list (Quick 2011)
 - Compliance more likely when promotes good professional practice (Quick)
 - Risk of competency drift and disengagement (Austin and HCPC 2015)
 - Early intervention and proactive approach to identifying and tackling harm (Sparrow 2008)
 - Understanding the 'why' not just the 'what' enhances compliance (McGivern, 2015)
-

Upstream – context



Developed from a diagram originally created by Malcolm Sparrow, Harvard University

Osteopathic context

- Osteopathic practice has a very high level of patient satisfaction (>95%)
 - Limited evidence (small numbers) that patient values are scored less highly, when measured with the Care and Relational Empathy Measure. Scores less than excellent include:
 - Really listening
 - Explaining things clearly
 - Helping you take control
 - Making a plan of action with you
-

CARE Patient Feedback Measure for

*** Type name of Practitioner here ***

Please write today's date here:

D	D	/	M	M	/
			Y	Y	

Please rate the following statements about today's consultation.

Please mark the box like this with a ball point pen. If you change your mind just cross out your old response and make your new choice. Please answer every statement.

How good was the practitioner at...	Poor	Fair	Good	Very Good	Excellent	Does not apply
1) Making you feel at ease (introducing him/herself, explaining his/her position, being friendly and warm towards you, treating you with respect; not cold or abrupt)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Letting you tell your "story" (giving you time to fully describe your condition in your own words; not interrupting, rushing or diverting you)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) Really listening (paying close attention to what you were saying; not looking at the notes or computer as you were talking)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) Being interested in you as a whole person (asking/knowing relevant details about your life, your situation; not treating you as "just a number")	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5) Fully understanding your concerns (communicating that he/she had accurately understood your concerns and anxieties; not overlooking or dismissing anything)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6) Showing care and compassion (seeming genuinely concerned, connecting with you on a human level; not being indifferent or "detached")	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Comments: If you would like to add further comments on this consultation, please do so here.

Dental context

- Patient satisfaction with dentistry and with dental regulation is generally high, however some issues reported with clarity of information and costs particularly in relation to:
 - Treatment options and
 - Informed consent.
-

**Some still feel
unclear about
costs though**



Ipsos Public Affairs



I didn't receive any information about the treatment options or costs. I paid for the treatment in instalments, but wasn't sure what the total would be, just hoped that what I'd been paying each week would cover it, and it did.



(Male, over 45, social grade C2, 2015)

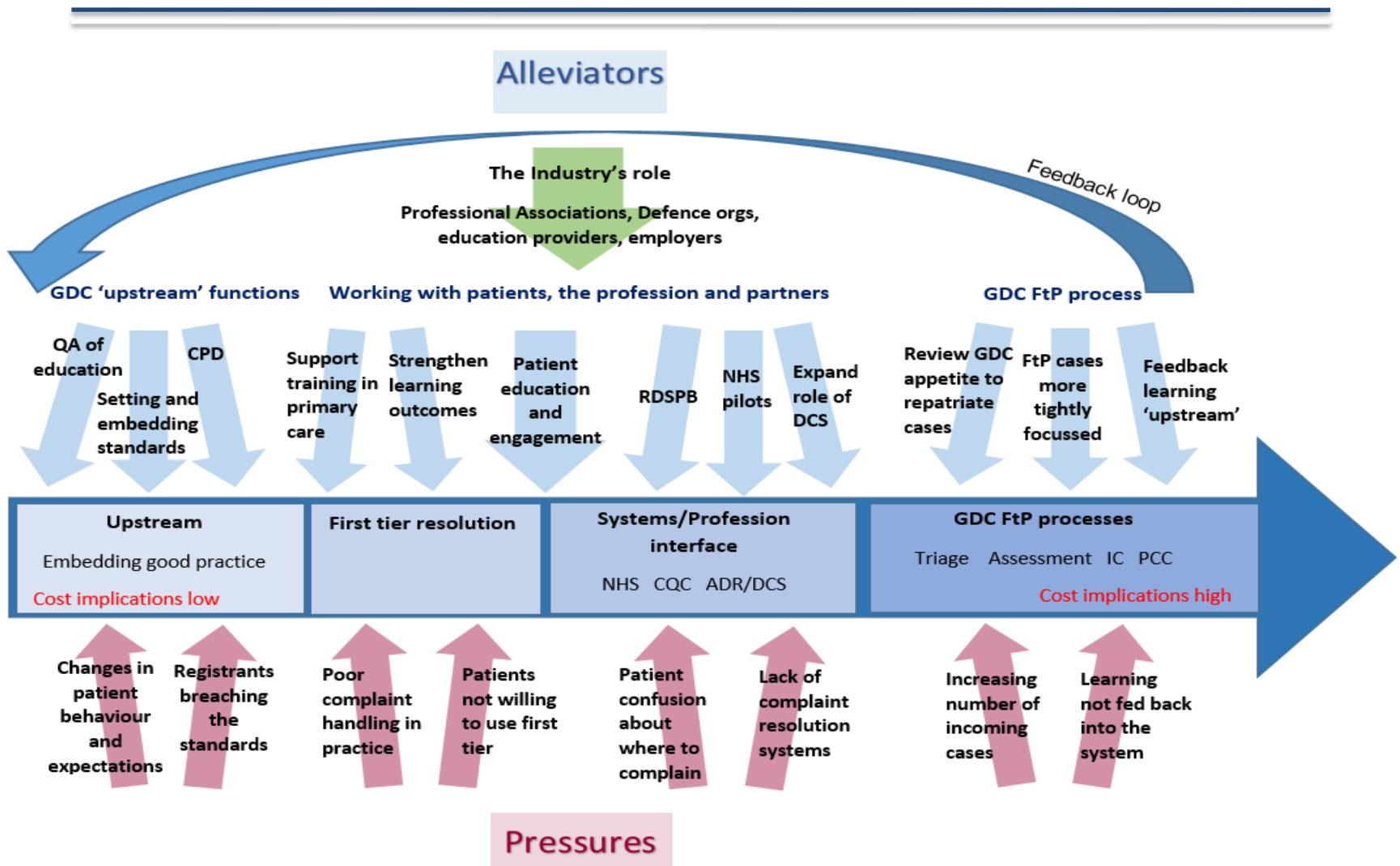


I basically just go in and pay what is necessary at the end of the session. I'm not too clued up on what things should cost.



(Male, over 45, social grade C2, 2015)

A more complex ecosystem



Interactive workshops

To explore different perspectives:

- a. What is good care?
- b. Given choice of two treatments which would you take
- c. Reflection

(Professor Bill Fulford and Professor Stephen Tyreman)

What is important to good care?

Q: Define three words which describe what is important to good care for you



Exploring difference in a case study

You have been diagnosed with a life-threatening disease.

You have two treatment options.

- Treatment 1: a tablet which in 50% cases provides complete cure and in 50% cases causes instant death
- Treatment 2: a medicine which allows remission for a fixed period of time

Q: What number of years would you require to choose treatment 2 over treatment 1 and why?

Findings

- Values are diverse – a wide range of descriptors of values had been generated from the discussions
 - Values are common – while descriptions of good osteopathic care were diverse, there was a common framework
 - Values are complex – the discussions about values had identified that while many were common, there were many nuances
-

Findings

However, in relation to specific decisions, values can conflict – what is important to different people is different!

- Family circumstances
 - Age
 - Life experience
 - Professional experience
 - Time
 - Culture
-

Framework

Compassion
Behaviour
Patient-Centred
Attitude
CARE
Consent
Effective Communication
Focus
Person-Centred
Informed
Concern
Empathy
Provides Comfort

Interventions
Effective
Good Hands
Observant
Skills
Safe
Palpatory
Awareness
Knowledge Base
COMPETENCY
Manual Technique
Reassuring Touch
Capability
Osteopathic
Communication Skills

Honest
Desire to Develop
Respectful
Reflective
Gentle
Confidential
PROFESSIONALISM
Ethical Behaviour
Collegiality
Integrity
Enquiring
Personal Values
Business-like
Sensitive
Recognising Feelings
Trustworthy

Environment
Patient-Centred
Person-Centred
History
Narrative
Time
Story
Growth
Location
CONTEXT
Associations
Expectations
Occupation
Culture
Social Status
Promotes Trust & Confidence

Case study

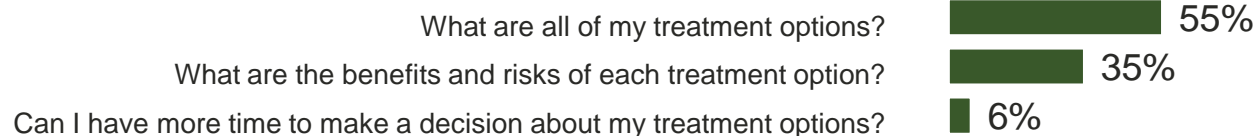
What happened to the framework when we applied this in a case study?

Findings

- No consensus about how to re-classify values or restructure the framework!
 - Debate about the meanings or definitions.
 - Considering different people's 'values' could be a signpost to thinking about good person-centred care.
-

Looking at this list, which questions do you think would be most useful to ask?

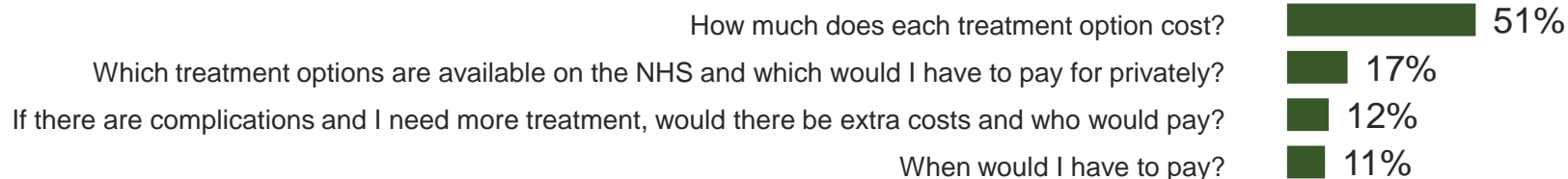
Treatment options



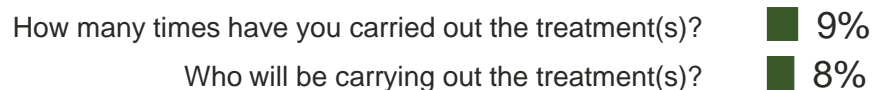
Aftercare



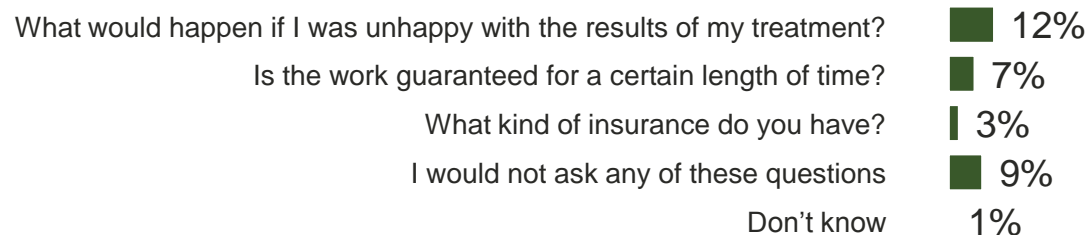
Costs



Experience



Assurances

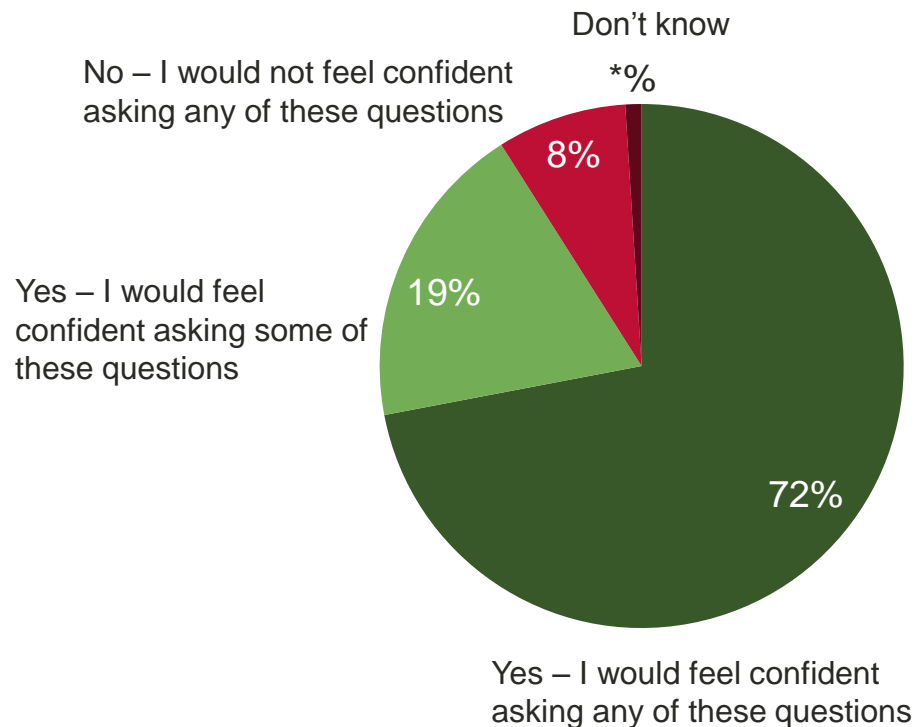


Base: People who have been to a dentist at some point (1564)

Source: Ipsos MORI

Most would feel confident asking any of these questions

Now thinking about these questions again, would you feel confident, or not asking them to a dental professional before making a decision about your dental care or treatment?



But a few groups would not...

- 13% → Aged 65+
- 14% → Social grade E
- 16% → Minority ethnic groups
- 14% → People who have not been to a dentist in the last 12 months
- 19% → People who are unlikely to recommend their dental practice

Base: People who have been to a dentist at some point: 1564

Source: Ipsos MORI

Redefining standards

Level	Activity	Definition
1	Overarching values/ principles	Possible inclusion of a set of high-level over-arching values/principles. Alternatively, reflect those developed and owned by the profession (e.g. 'Patient Charter').
2	Standards	'Must statements'.
3	Guidance	Supporting information that helps to underpin the Standards.
4	Learning resources/ decision making resources	Communication and engagement and including: material explicitly linked to standards, providing more explicit explanation of why standards are in place, and contextual material about how they apply in practice. Decision making frameworks to support professional judgement but also resources to support patients.

Next steps

1. Scope out project outline
 2. Explore through stakeholder workshops the development of different approaches to better explore what is important to the patient and the clinician in the dental and osteopathic contexts
#whatmatterstoyou
 3. Develop supporting decision making templates and case studies with 'take away tweaks'
 4. Test out tools
-

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Next steps

5. Administer CARE Measure
 6. Ask groups to use decision making frameworks
 7. Administer CARE measure again to see if any difference
 8. Seek feedback
 9. Qualitative evaluation to check for unintended consequences
-

Reflection

- What
 - So what
 - Now what – what is your take away tweak?
-

Thank you

If you are interested in finding out more about our project or have any questions, please contact:

- Fiona Browne: fbrowne@osteopathy.org.uk
- Guy Rubin: grubin@gdc-uk.org

