

EQIP Champions Monthly Call Planner

Tuesday 17 December 2019

ALL EQIP CHAMPIONS	NUMBER
	T:0800 022 9851
	Pin: 988627

1:00 Monthly RCPCH EQIP call
2:00

Tuesday 21 January 2020

ALL EQIP CHAMPIONS	NUMBER
	T:0800 022 9851
	Pin: 988627

1:00 Monthly RCPCH EQIP call
2:00

Tuesday 18 February 2020

ALL EQIP CHAMPIONS	NUMBER
	T:0800 022 9851
	Pin: 988627

1:00 Monthly RCPCH EQIP call
2:00

Tuesday 17 March 2020

ALL EQIP CHAMPIONS	NUMBER
	T:0800 022 9851
	Pin: 988627

1:00 Monthly RCPCH EQIP call
2:00

Tuesday 29 April 2020

ALL EQIP CHAMPIONS	NUMBER
	T:0800 022 9851
	Pin: 988627

1:00 Monthly RCPCH EQIP call
2:00

Wednesday 13 May 2020

ALL EQIP CHAMPIONS	NUMBER
	T:0800 022 9851
	Pin: 988627

1:00 Monthly RCPCH EQIP call
2:00

PROGRESS REPORT

EQIP champion name: Eve Bassett

Trust/Health Board team name: Royal United Hospital, Bath

Trust/Health Board team members:

Eve Bassett, Toby Hunt, Faye Price, Jenny Ferguson, Carrie Furnell, Sam Amin

Project aim:

To develop and implement pathway for 1st paroxysmal events allowing review by pediatrician with special interest in epilepsy

Planned tests:

Test 1: “patient story” – will this help win “buy-in” of consultant colleagues – success with several colleagues

We had a number of stories to demonstrate different learning points that those unfamiliar with most up to date epilepsy care may not be aware of – see PDSA cycles on QIportal

Test 2: presenting Epilepsy 12 audit at governance meeting to facilitate discussion re: establishing “first fit” pathway – largely successful

Lots of ideas generated by others to help streamline the Ep12 completion – see QIportal for notes on this

Test 3: current and revised process map for first fit discussed at governance meeting – largely successful

This has been through a number of revisions (see documents on QI portal)

Included development of an email to facilitate communication and streamline process

Using email Test 3a

Triaging following email Test 3b

– process streamlined after initial time taken to evaluate outcome of series of tests

- Process map reflects changes**

Test 3c : Peer review of triaging process to ensure we are all doing the same thing

Test 4: extracting data from epilepsy 12 to ensure data drives service development – more complicated than first thought! Hopefully will have something meaningful by Feb call – we have had to be more inventive about way to capture data!

(Test 3 has allowed a new way to capture data in a more unified way – unintended consequence)

Test 5: pilot feedback tool developed – awaiting colleague review before rolling out and putting into practice – aim to have captured 10 patients/10 parents by end of QI project

Test 6: ESN call to families ahead of clinic for some specific pre-identified patients

Need to add into process map – see PDSA notes for test 3

Topics covered in phone call reviewed after each call – 3 calls made and analysed with documented changes tracked in notes

Need to collect data and feedback form this aspect

See notes on QI portal

Test 7: Telephone consultations – evolving process – 1 test done so far for a follow up patients

Challenges:

Lack of accurate coded data regarding potential demand for service

Extracting data from epilepsy 12 is time consuming (we have recruited someone else to the team to facilitate this)

Time capacity for epilepsy nurse

Room capacity for outpatients

Geography of patient cohort

Patients being referred from so many different sources – reviewing process map has really helped identify all routes into the service with the aim of eventually streamlining this process via PDSA cycle method

Successes:

Established core group E12 meeting 9:15-9:45 Thursday each week

Managed to up ESN job plan from 3 days to 4 days – thinking ahead to establishing ESN clinics

Process map, stakeholder map and driver diagram completed although we can now see this remains a work in progress

Process map discussed at governance meeting

Recruited another team member to evaluate epilepsy 12 data

Spent time extracting sources we have to get data to help inform service redesign

Tried “add on” first fit slot to clinic

Early signs show good consultant buy-in

Consolidation of patient and family mental health/mindfulness/parenting support across the region (4 different CCGs slightly complicating process) – “Mental Health Support Guide”

Use of pasta in a jar to evaluate patient satisfaction in community clinics

Next steps:

Test 4: Re-evaluate available data using epilepsy 12 plus local database and convert to clinic capacity evaluation and new clinic template draft

Liaise with others across network to potentially make use of tried and tested pathways for first fit clinic and beyond

Formalise “Mental Health Support Guide” via Patient Experience team/governance team etc

Feedback tool developed – awaiting testing

Need to evaluate the data for the few patients who have gone through the new process map and compare to pre-EQiP process