

Perioperative Care for Older People undergoing Surgery The (POPS) Network

April 2022



Core Event –
April 2022

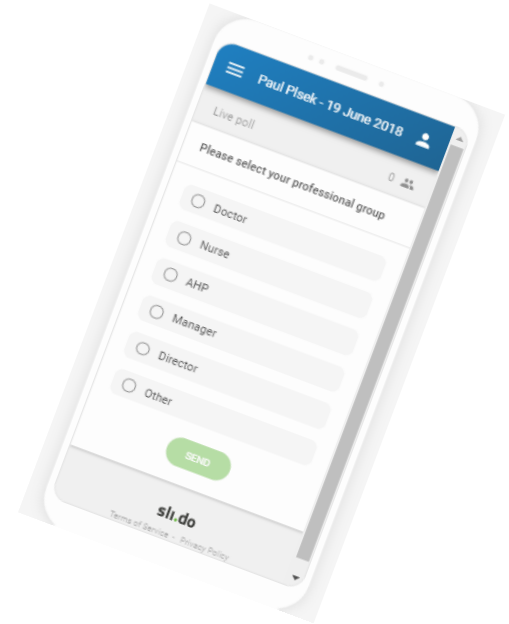
Agenda

09:00	Welcome and introduction to the day Dr Jugdeep Dhesi Clinical Lead, POPS Network
	Implementing shared decision making in CGA based services Dr Catherine Meilak, East Kent Hospitals University NHS FT
	Engaging patients and public in the co-design of services Dr Anna Whittle, Dartford & Gravesham NHS Trust
	Clinical Update Dr Jugdeep Dhesi Clinical Lead, POPS Network
	Networking Opportunity Simon Griffiths Director and QI Associate, NHS Elect
	Measurement Update Matt Tite Measurement Lead POPS Network
	Next Steps and Close Dr Jugdeep Dhesi Clinical Lead POPS Network
11:30	CLOSE

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- Enter the event code **#POPS2-APRIL**
- Use the polls to give us feedback about the day





Implementing shared decision making in CGA based services

Dr Catherine Meilak, East Kent Hospitals University NHS FT

Experience of shared decision making

Dr Catherine Meilak
POPS Consultant



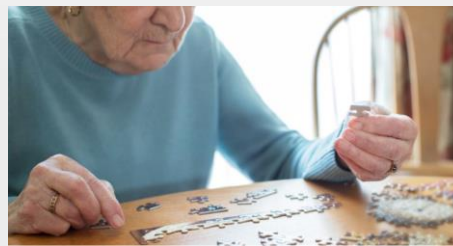
Vascular POPS service

- Started September 2019
- **Criteria for referral:**
- ‘Older age’ with:
 - Frailty
 - In need of medical optimisation
 - Cognitive impairment
 - Difficult decision making
- Inpatient and outpatient services set up



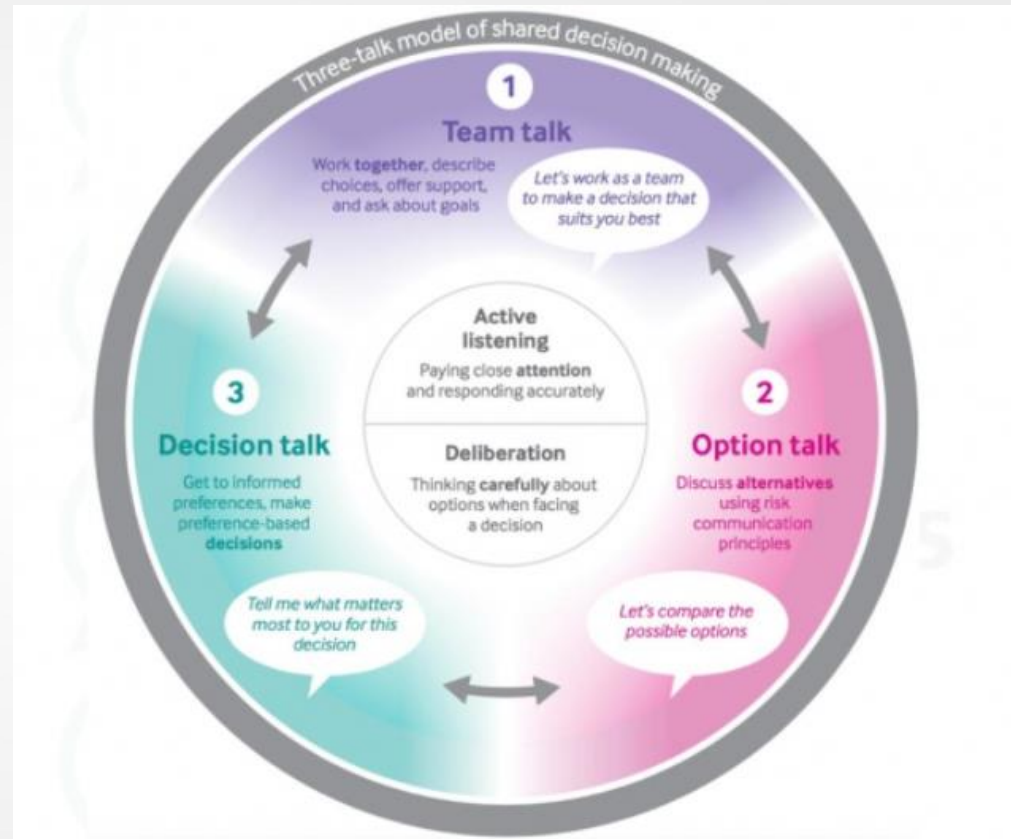
Skills and preparation

- The knowledge and skills required are very broad.....
- I have become more useful to my patients as I have gained experience
- Holistic assess/ multidisciplinary comprehensive geriatric assessment
- What are all the options available to the patient (homework before the consultation/ attendance at MDM). Is a joint appointment needed?
- An understanding of the physiological changes of the types of surgery
- What the post-op/non-operative /conservative trajectories might be for the patient
- YOU need to understand all of this in order to have the conversation with the patient
- Prepare the patient that they will be having a shared decision making conversation (Choosing wisely BRAN leaflet: CPOC website)
- Invite and encourage family/friends to attend
- What is the health literacy of your patient?
- Some patients may need more than one 'consultation' to undergo this process



Implementation considerations

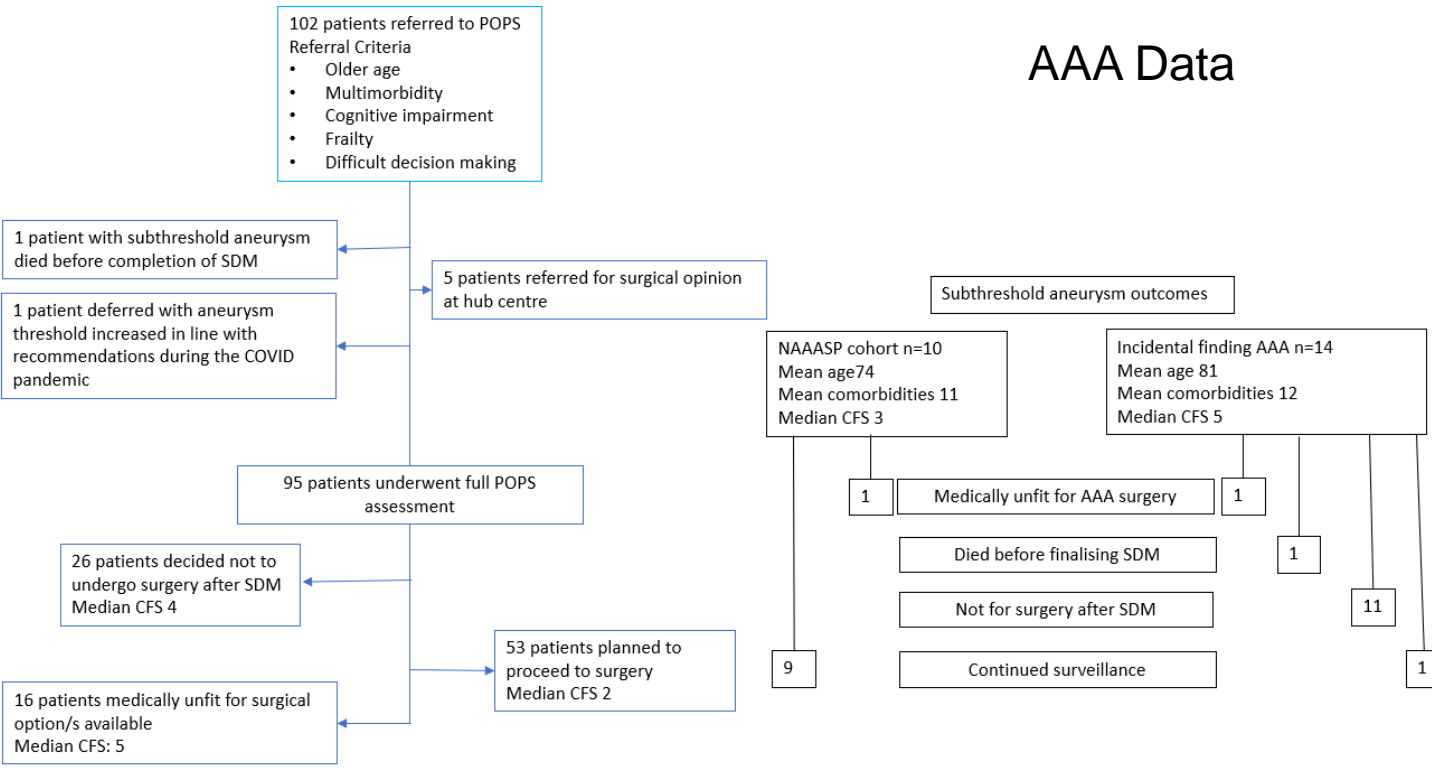
- TIME. These conversations take time. Is adequate time in clinic allocated? Have you had time to prepare the information you need to make the most out of the consultation?
- How are you going to train your team?
- How to have the conversation: Three-talk model. Using BRAN
- How well are you doing with the SDM process? SDM-Q 9
- Is SDM outcome data worth collecting: to help to inform further service development/restore and recovery



From CPOC website



AAA Data



- 102 AAA patients were seen between October 2019-February 2021.
- 26% of all patients seen in POPS clinic decided not to pursue surgery.
- 24 patients (24%) seen were subthreshold, 14 (58%) of these, chose to not pursue surgery (all of the AAAs in this latter group, had AAAs found incidentally).
- 26% of patients seen had ‘do not resuscitate’ discussions undertaken, 29% had an anticipatory planning discussion documented in the clinic letter. Where appropriate, this included a management plan to be followed in the event of AAA rupture, including place of end of life care.



How to document the SDM process

Shared decision making documentation		
	<i>Discussed</i>	<i>Notes</i>
Benefits <i>of the procedure</i>	<input checked="" type="checkbox"/>	To reduce the risk of rupture
Risks <i>of the procedure</i>	<input checked="" type="checkbox"/>	<p>Surgical risk – discussed by surgical team</p> <p>Medical risk – described below</p> <p>Risk of delirium and permanent cognitive decline</p> <p>Risk of cardiac event: optimised</p> <p>Increased risk of infection due to methotrexate</p> <p>Increased risk of respiratory complications due to poor mobility</p> <p>Functional risk - if develops medical and/or surgical complications</p>
Alternatives <i>to surgery</i>	<input checked="" type="checkbox"/>	There are no alternatives to surgery
What will happen if we do <i>nothing</i>?	<input checked="" type="checkbox"/>	The aneurysm would remain, rupture risk and risk of death would remain and would increase over time
<p><i>For more information and resources regarding shared decision making, visit www.choosingwisely.co.uk</i></p>		

- 
Benefits
What are the Benefits?
- 
Risks
What are the Risks?
- 
Alternatives
What are the Alternatives?
- 
Nothing
What if I do Nothing?



Interface with the consent process

- Informed consent establishes a minimal legal standard in which
 - Clinicians disclose the risks, benefits and alternatives of a proposed treatment or procedure
 - People accept or reject this procedure that has been identified to be the most relevant for them
 - ? Could just be a collection point of a signature and more of a one way process (Kunneman 2016)
- SDM: more evolved process, looking to find the correct solution to the 'problem' and is a 2 way (or more!) process
- SDM includes discussion of topics not traditionally discussed in the consenting process
 - Is the patient fully consented if they have not been informed of their individualised risk: including potential cognitive and functional risks?
 - Difficulty with estimating severity and individualised % risk of risks such as delirium and cognitive decline



Any questions?





Engaging patients and public in the co-design of services

Dr Anna Whittle, Dartford & Gravesham NHS Trust

Achieving meaningful PPI in service development

Anna Whittle
Geriatrician
Darent Valley Hospital

POPS

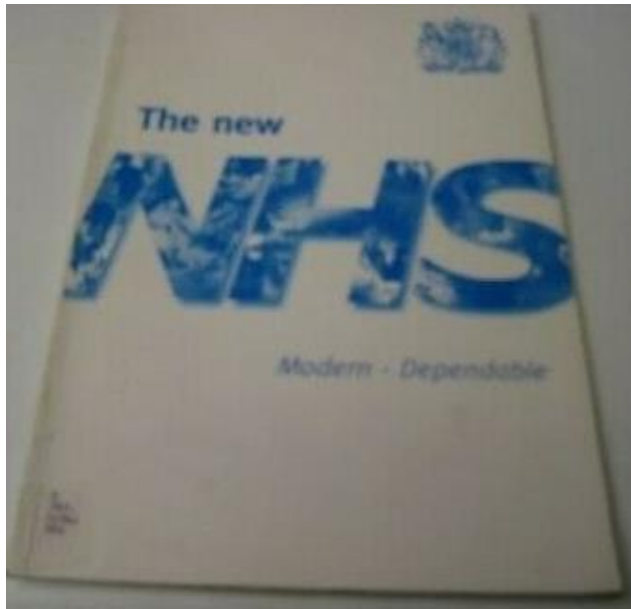
Proactive care of Older People
who are undergoing Surgery

Guy's and St Thomas' **NHS**
NHS Foundation Trust

NHS

Dartford and Gravesham
NHS Trust

PPI



public&patient
experience&engagement



Putting people at the heart of care

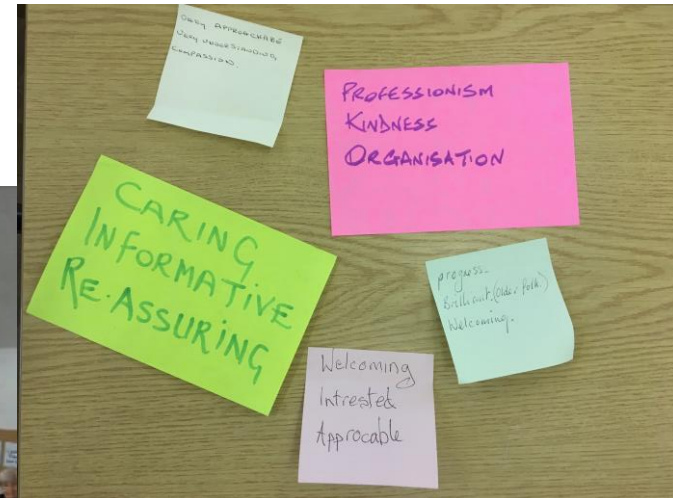
The vision for public and patient experience and engagement in health and social care



Background



How did we collaborate?




What has our collaboration achieved?

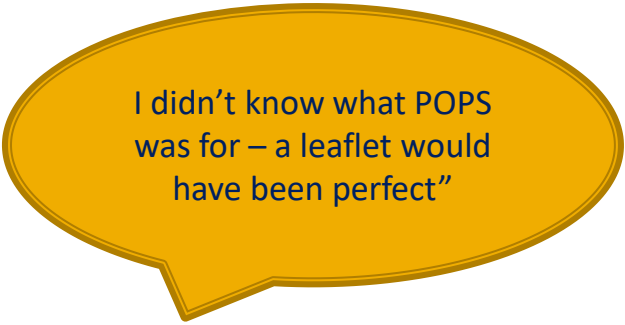


Patient-related outcomes

- Leaflet
- Change in practice
- Map/checklist



“Getting letters about my appointment from different hospitals had been confusing”



I didn't know what POPS was for – a leaflet would have been perfect”

Process related outcomes



we are your
PALS | Patient
Advice
& Liaison
Service

Staff and organisational related outcomes



Enablers



Challenges

- Representation
- Continued momentum
- Money & time

SYSTEMATIC REVIEW

Open Access

Engaging patients to improve quality of care: a systematic review




Yvonne Bombard^{1,2*}, G. Ross Baker¹, Elaina Orlando^{1,3}, Carol Fancott¹, Pooja Bhatia¹, Selina Casalino², Kanecy Onate¹, Jean-Louis Denis⁴ and Marie-Pascale Pomey⁵

RESEARCH

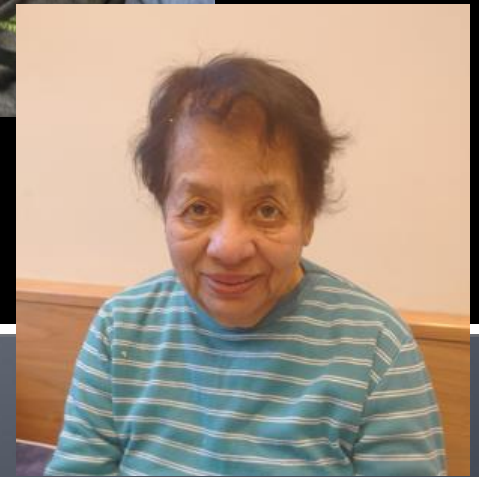
Open Access

Exploring the theory, barriers and enablers for patient and public involvement across health, social care and patient safety: a systematic review of reviews



Josephine Ocloo^{1,2*} , Sara Garfield^{3,4}, Bryony Dean Franklin^{3,4} and Shoba Dawson⁵

Conclusions



Tips

- Recognise the challenges
- Utilise resources (NHS Elect)
- Find your trust's patient engagement officer
- Engage early and continue to engage
- Aim high
- Enjoy the process



Clinical Update

Dr Jugdeep Dhesi, Clinical Lead POPS Network

Coffee and Networking



Potential topics for conversation:

- getting your project off the ground: how it feels to lead this work; what support do you need
- measurement/data collection
- clinical issues: CGA; ID of frailty; working with different specialisms
- patient & staff experience/shared decision making



Measurement Update

Matt Tite, Clinical Lead POPS Network

POPS Measurement Journey

Launch Event (Part 1: 03/02/22): Setting the Aim

Launch Event (Part 2: 17/02/22): Understanding the scope, using functional mapping.
Driver diagram development session and the 7 steps to measurement

Measurement Masterclass (24/02/22): Measurement for Improvement knowledge, how and what to measure

Measurement for improvement & Shared Decision making

Measurement for improvement & Experienced Based Design

10 Point checklist (07/04/2022): 10 point check list to help your measurement journey and request for mid term data

Your Measurement visit

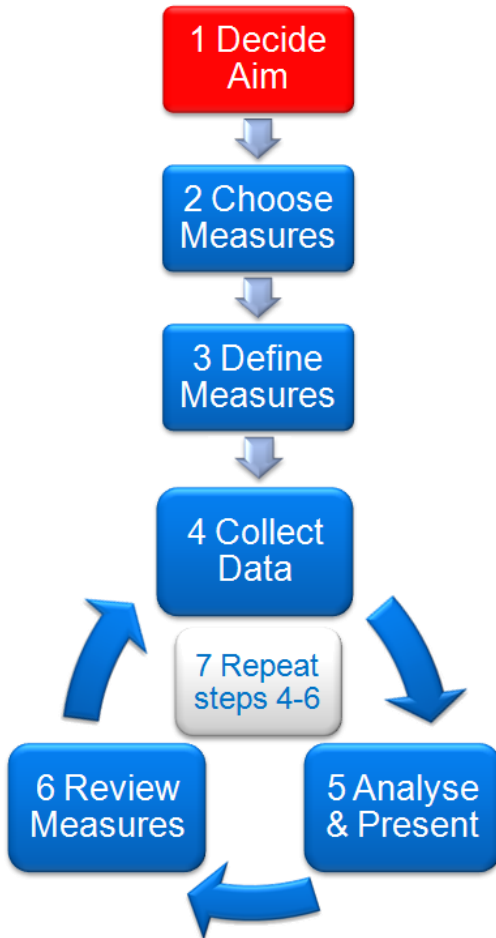
Mid National Event: Share your working data and the tools you are using for data collection

Final National Event (04/08/2022): Your charts

Things we have spent time learning so far...

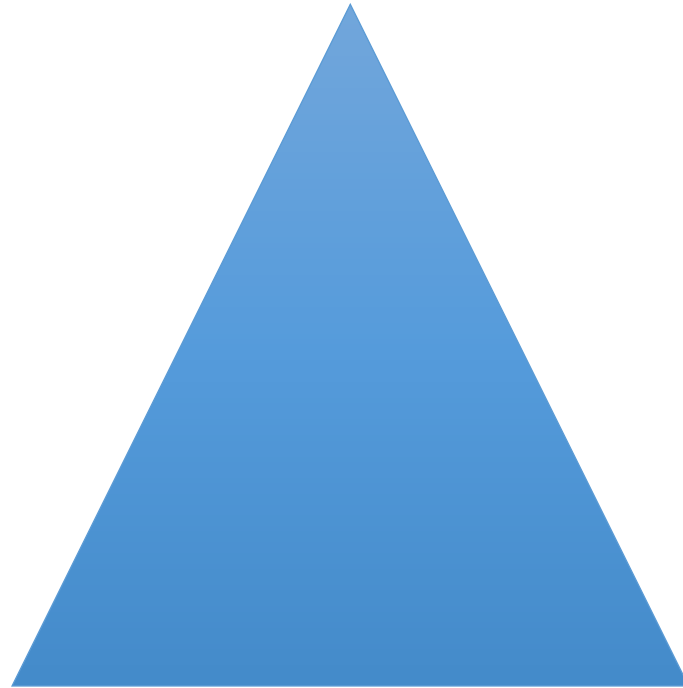
- Aim statements
- Functional maps
- Driver Diagrams
- Outcome, process and balancing measures
- EBD
- SPC
- Pareto

The 7 steps to measurement



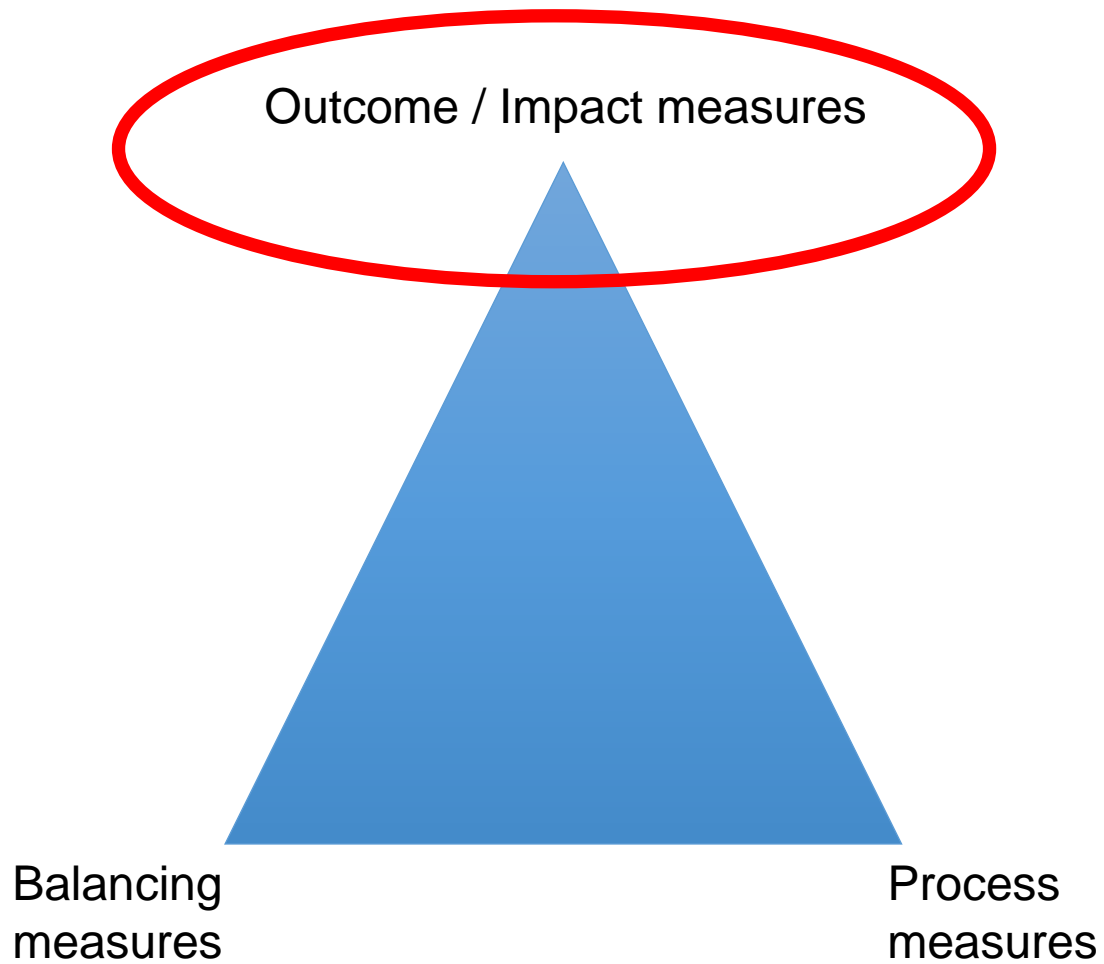
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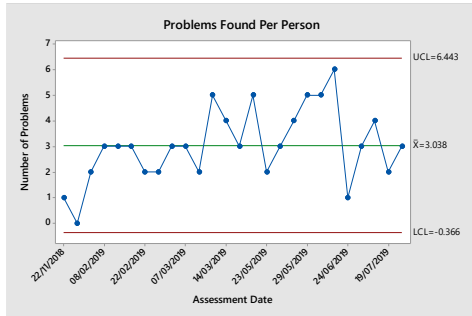
Outcome / Impact measures



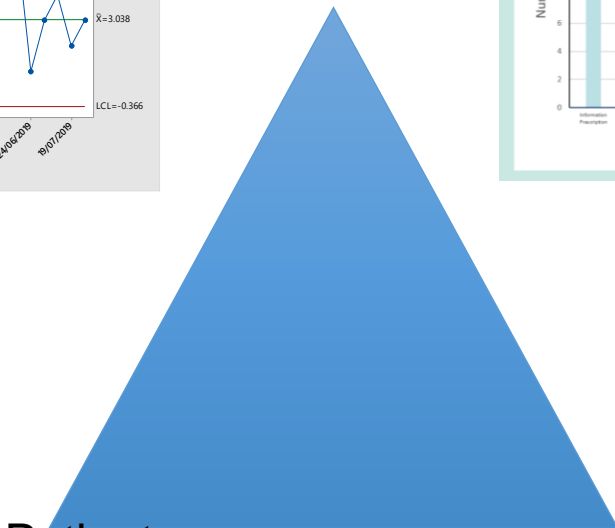
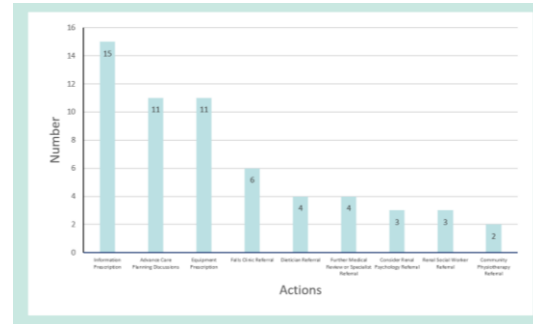
Balancing
measures

Process
measures



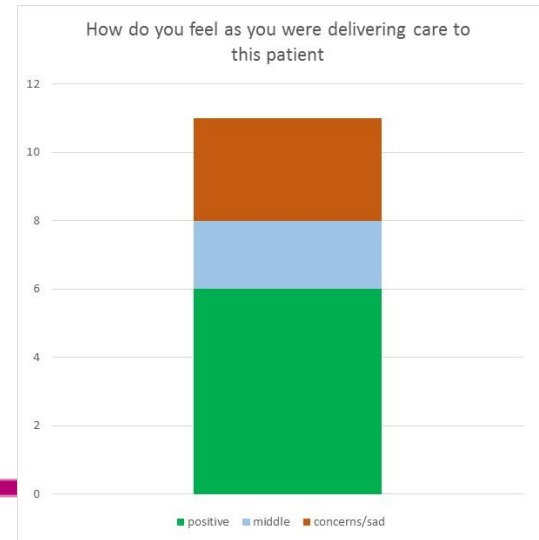
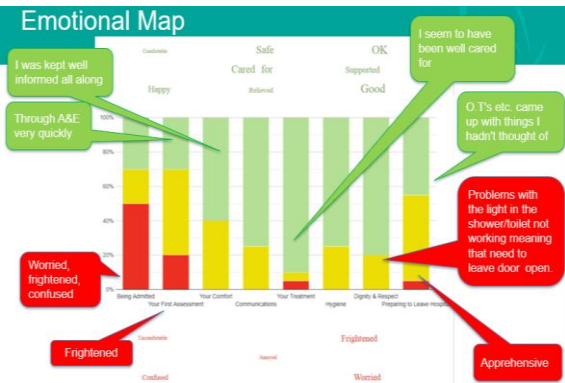


Data / Graphs

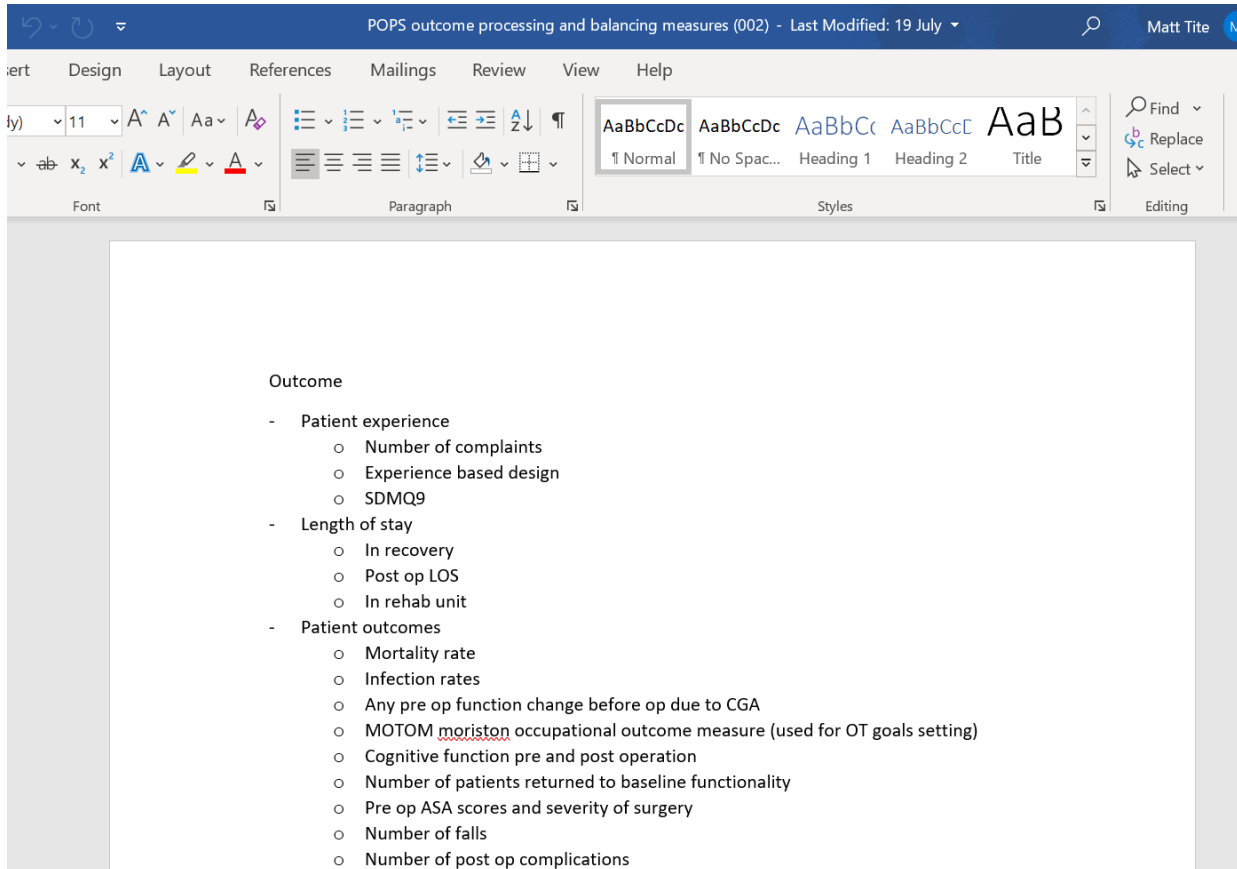


Patient Perspective

Staff Perspective



Outcome, process and balancing measures (from Cohort 1 &2)



POPS outcome processing and balancing measures (002) - Last Modified: 19 July

File Home Insert References Mailings Review View Help

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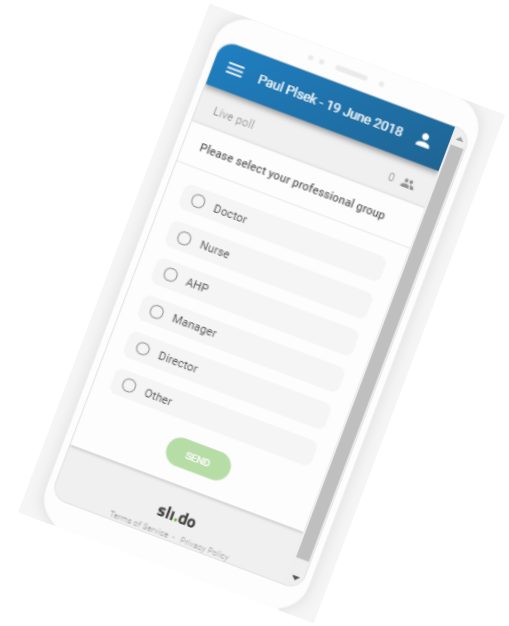
Outcome

- Patient experience
 - o Number of complaints
 - o Experience based design
 - o SDMQ9
- Length of stay
 - o In recovery
 - o Post op LOS
 - o In rehab unit
- Patient outcomes
 - o Mortality rate
 - o Infection rates
 - o Any pre op function change before op due to CGA
 - o MOTOM moriston occupational outcome measure (used for OT goals setting)
 - o Cognitive function pre and post operation
 - o Number of patients returned to baseline functionality
 - o Pre op ASA scores and severity of surgery
 - o Number of falls
 - o Number of post op complications

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slido



**I feel we are progressing well
with our measurement
journey**

ⓘ Start presenting to display the poll results on this slide.

slido



From a measurement perspective, one thing we are really pleased about is:

ⓘ Start presenting to display the poll results on this slide.

slido



From a measurement perspective, one thing we are struggling with is:

ⓘ Start presenting to display the poll results on this slide.

Matt's Measurement for improvement checklist

1	Do you have a working aim statement that all your stakeholders agree with? (If you have not changed it 4 or 5 times you are not doing it right)	Yes / No
2	Do you have a functional map of your system? Do you use it in meetings to talk about where the opportunities and possible test of change are? Eg LOS, are you affecting the whole LOS, or a section of it?	Yes / No
3	Is measurement an agenda item on your regular improvement meetings?	Yes / No
4	Do you have a driver diagram? Who has contributed to it? Sharing the driver diagram is key to getting the best ideas and buy in.	Yes / No
5	Have you linked your interventions to measures (from your Driver diagram)	Yes / No
6	Have you got a way of creating your Statistical Process Control (SPC) charts? Weekly or daily dots, not monthly data points.	Yes / No
7	Have you used SPC to understand the amount of different/change/improvement that you have made. Not before and after. Before, during and after.	Yes / No
8	Are you using quality improvement outcome measures? Outcome measures in quality improvement are different from outcome measures in research.	Yes / No
9	If you have made a difference (via the SPC chart), have you used it to calculate the ROI?	Yes / No
10	Have you got a copy of your Reference Costs?	Yes / No



Summary and closing remarks

Simon Griffiths

Next steps

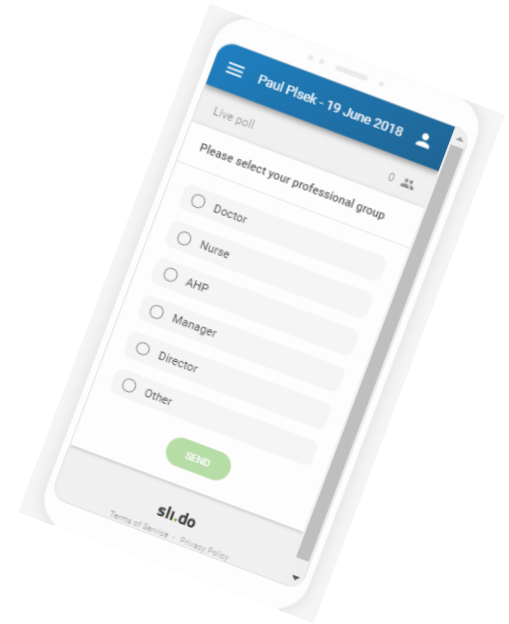
As a team think about the following:

- Ensure you've identified core members of your team e.g. your Exec Sponsor, Analyst, Project Manager etc.
- Access the POPS website www.popsolderpeople.org and let us know what content would be useful.
- The password for the pages in the Members Area is **POPSNetwork2021**
- Access the POPS Toolkit at the website.
- Work with us to schedule the date for your virtual measurement site visit.
- **Register for the next event on 5 May 09:00-11:30.**
- **Sign up for the upcoming webinars:**
 - *Building the evidence base for CGA based perioperative services* on 25 April 13:30-14:30
 - *Our Vascular Journey: Implementing vascular POPS* on 27 April 15:00-16:00
 - *Business Cases* on 17 May at 13:00-14:00
 - *Developing the pharmacy workforce to deliver perioperative care* on 27 May 12:30-13:30

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*Think about the support you
want/need and let the
programme team know at*

networksinfo@nhselect.org.uk