

## **Delivering a person-centred wheelchair service using shared decision making (SDM)**

**Lynne Peters & Lynn Jackson**, Bridgewater Community Healthcare NHS Foundation Trust

**Brook Howells**, Advancing Quality Alliance (AQuA)

### **Summary**

The project demonstrates cultural change using shared decision making (SDM) within clinical practice. An AQuA quality improvement programme supported education and implementation of SDM. Quantitative and qualitative measurement evidenced the cultural change achieved, resulting in all service users having the opportunity to engage in shared decisions about their wheelchair provision.

### **Aims & Objectives**

By March 2017 100% of wheelchair service users will have had the opportunity to engage in SDM. Complete an AQuA programme to support the team to implement SDM as identified in local Commissioning for Quality and Innovation (CQUIN). Understand quality improvement tools and techniques to support the implementation of SDM. Evidence patient involvement in SDM. Demonstrate better outcomes in relation to use of prescribed equipment. Demonstrate patients who are active participants in managing their mobility have better outcomes.

### **Background**

SDM is a patient-centred approach where patients, when they reach a decision crossroads about their health, can review all the treatment options available and participate actively with healthcare professionals in making that decision (NHS England 2015). The Wheelchair Charter 2015 identified the need for person-centred wheelchair services' user and carer involvement in assessment and prescription of the right wheelchair. Person-centred care relies on the ability of clinicians and services to put patients at the centre of decision making.

Finding a clear, practical method of taking this forward is not always easy (The Kings Fund 2015). The Health & Social Care Act 2012 set out the Government's vision of an NHS that puts patients and the public first: *No decision about me, without me* (Department of Health 2010). The NHS Constitution 2015, NHS Mandate 2016-17, NHS Standard Contract 2016-17, and Five Year Forward View 2016 highlight the need for greater patient involvement, specifically SDM. AQuA provided an intensive training programme to enable the service to embed SDM and support a cultural change. The service was able to: • Define SDM • Understand the case for SDM and the benefits of practicing SDM • Understand the key challenges to implementing SDM and how to manage these • Identify tools and resources to support implementation of SDM • Measure the effectiveness of embedding SDM. The implementation of SDM was evaluated on its effectiveness in embedding SDM in wheelchair services. This provided both qualitative and quantitative results:

Longitudinal staff survey – assesses readiness and engagement in implementation of SDM and existing support and resources at disposal.

'So what' measures – assesses impact on system processes and clinical outcomes.

CollaborATE & SURE – patient reported measures for patient centred care.

Patient experience – qualitative and anecdotal evidence including patient stories, video clips and quotes via Patient Advice and Liaison Service (PALS), Expert Patients Programme (EPP) and team patient participants.

The service established baseline measures to demonstrate the effectiveness of SDM.

## Results

The service has completed the AQUA programme and quarter four of the SDM CQUIN. CQUIN was introduced in 2009 to make a proportion of healthcare providers' income conditional on demonstrating improvements in quality and innovation in specified areas of patient care.

Achievements to date are:

- Formal SDM training completed
- Introduction to quality improvement tools and techniques
- Patient activation in SDM through promotion of *Ask 3 Questions* prior to and during clinic appointments.
- Documentation reviewed to embed and evidence SDM in patient records
- Longitudinal staff survey completed
- CollaboRATE and SURE completed at each intervention.

Results collated for and reported for CQUIN (quarter 2 and 3)

Actions identified:

Referral management – introduce SDM at the point of referral

Communication - review documentation and written communication with patients

Education/Resources - develop the web site and produce a video to better inform patients about SDM and the Wheelchair service. Provide education for referrers and patients.

## Discussion

Enabling people to make a good choice requires a collaborative relationship: a partnership between professionals, patients and their families. This will only become a reality by embedding SDM into wheelchair practice. It is paramount that professionals understand and support the need to embrace patients as active partners in their care. The NHS must move away from a paternalistic approach to one where professionals are able to find common ground with patients about their management. This will only succeed when professionals understand the background and context of patient-centred care which not only imposes a legal shift in the relationship between the professional and the patient, but is also the ethical thing to do. Failure to accept the patient as an equal partner in decisions about their care and an inability to explore all the options available for treatment is no longer an accepted form or choice of practice.

In 2017 personal health budgets (PHBs) will be introduced in wheelchair services. PHBs offer the opportunity to work in equal partnership with health professionals about how patients' health and well-being needs can best be met to give patients more choice and control over their health care. For this to become a reality, wheelchair clinicians need to have SDM skills to enable true patient-centred care. SDM training and support for clinicians is essential to create a cultural change and prepare for a future that empowers patients to take more control over their care and treatment.

## References

- Department of Health (2010). *Equity and Excellence: Liberating the NHS*. The Stationery Office, 2010
- Five Year Forward View (2014). <https://www.england.nhs.uk/wp-content/uploads/2014/10/5yfv-web.pdf> [accessed 6th October 2016]
- NHS Constitution for England (updated 2015). <https://www.gov.uk/government/publications/the-nhs-constitution-for-england/the-nhs-constitution-for-England> [accessed 20th December 2016]
- NHS England (2015). *Shared Decision Making* <https://www.england.nhs.uk/ourwork/pe/sdm/> [accessed 15th August 2016]
- Department of Health (2017). *The Government's mandate to NHS England for 2016-17* [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/494485/NHSE\\_mandate\\_16-17\\_22\\_Jan.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/494485/NHSE_mandate_16-17_22_Jan.pdf) [accessed 20th December 2016]
- NHS England (2017). *2016/17 NHS Standard Contract*. <https://www.england.nhs.uk/nhs-standard-contract/16-17> [accessed 20th December 2016]
- Department of Health (2012). *Health and Social Care Act 2012*. <http://www.legislation.gov.uk/ukpga/2012/7/contents/enacted> [accessed 20th December 2016]

The Kings Fund (2015). *Patient and Family-Centred Care toolkit*  
<http://www.kingsfund.org.uk/projects/pfcc?gclid=CILWt6XFsMgCFeNe2wodNekB1g> [accessed 6th October 2016]

Wheelchair Leadership Alliance (2015). *Wheelchair Charter*.  
[http://www.rightwheelchair.org.uk/images/The\\_Wheelchair\\_Leadership\\_Alliance\\_Charter.pdf](http://www.rightwheelchair.org.uk/images/The_Wheelchair_Leadership_Alliance_Charter.pdf)  
[accessed 20th December 2016]

### **Glossary of terms**

AQuA - The Advancing Quality Alliance. NHS health and care quality improvement organisation transforming the safety and quality of healthcare.

CQUIN - Commissioning for Quality and Innovation NHS England

CollaboRATE – patient reported measure of shared decision-making

SURE - validated tool to screen patients for decisional conflict.

SDM - Shared decision making

SMS - self management support

### **Emails**

[lynne.peters@bridgewater.nhs.uk](mailto:lynne.peters@bridgewater.nhs.uk); [lynn.jackson@hsthpcnhs.uk](mailto:lynn.jackson@hsthpcnhs.uk) ; [brook.howells@srft.nhs.uk](mailto:brook.howells@srft.nhs.uk)