



An Online Clinical Quality Application:

Testing the concept and its acceptability for clinicians.

Clare Connor

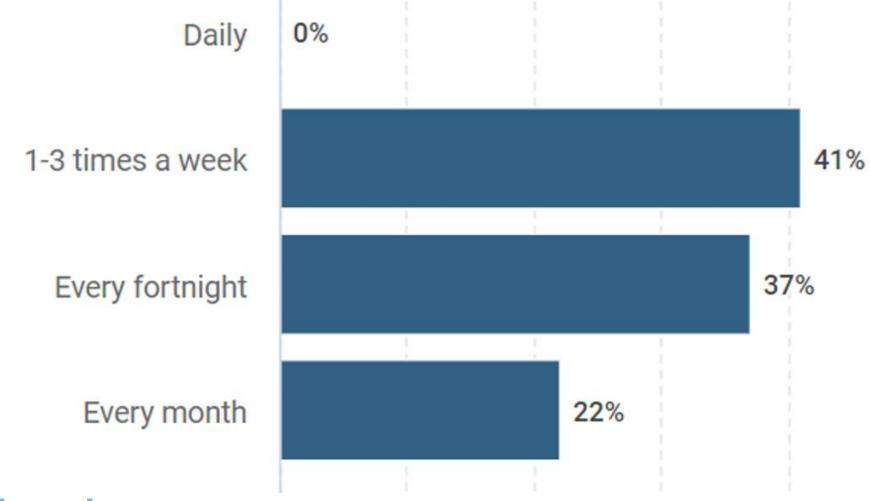
Musculoskeletal Physiotherapy Clinical Lead Aneurin Bevan University Health Board



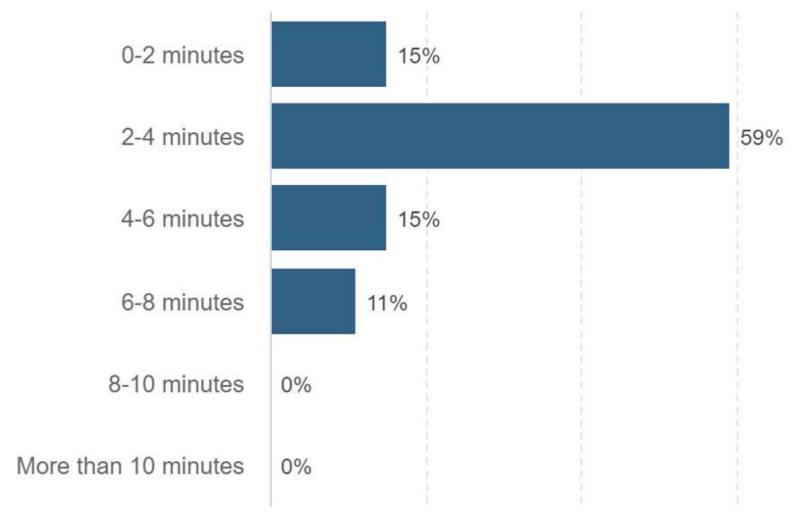
Clinical Quality Audit and the Eye Roll



How often should the Clinical Quality Application (CQA) be used?



Time to complete a CQA entry





Time taken to complete **biannual** paper audit 3 hours per staff member

2 audits for 100 clinicians staff hours cost £6050





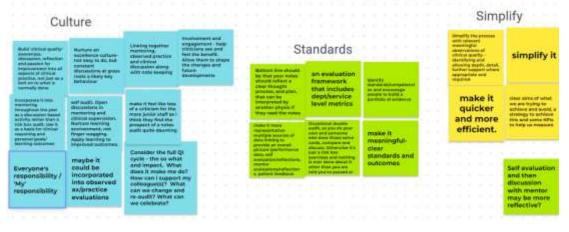
Each CQA entry takes approx. 2-5 minutes and can be completed at the end of an appointment or during scheduled mentoring discussions. Added staff hours **cost £0**



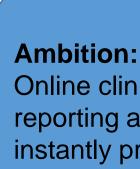
Engagement



Clinical Quality Evaluation: How could we make it better?



- What it "should" be like:
 - Quick and simple to complete.
 - Part of daily practice, mentoring and clinical discussions.
 - Informs learning and improvement.
 - A quality culture of continuing learning, reflection and change.
 - Representative of the dimensions of quality that support a therapeutic alliance between healthcare and patients.



Online clinical quality reporting application that instantly produces quality dashboards for individual and service

Content and concept:

MSK Physiotherapy Clinical Leads



Technical design:

Computer Science Students

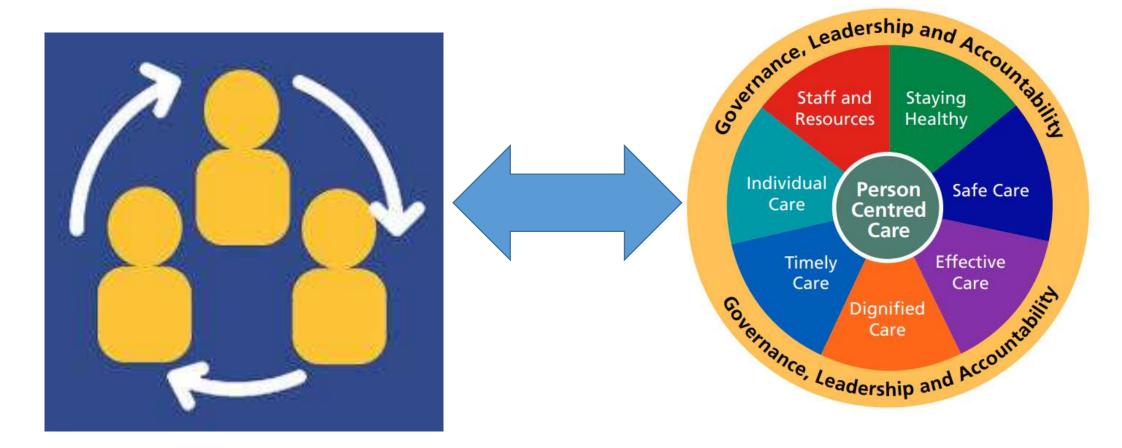


Code for Online application free to use in NHS service.

Proof of concept and user acceptance study Bevan Exemplar project

Bevan

Development



Welcome to Care Quality Dashboard

Get started

If this is your first time using the Care Quality Dashboard, please contact your department or hospital manager to obtain a unique Join URL. This will automatically link your account to your corresponding department or hospital, so you can start completing self-reports and viewing your statistics.

Login or Register





Complete your self-reporting on the device of your choice in a matter of minutes. The self-reporting a page is clear and simple to use allowing you to efficiently report your recent experience. Remember to submit as your answers are not automatically saved



Track your self-reporting any time and on any device. The statistics page gives you great flexibilty allowing you to change data ranges and whether the submissions were a part of a mentoring session. There is also a quick to read summary at the top which gives you great insight of your average

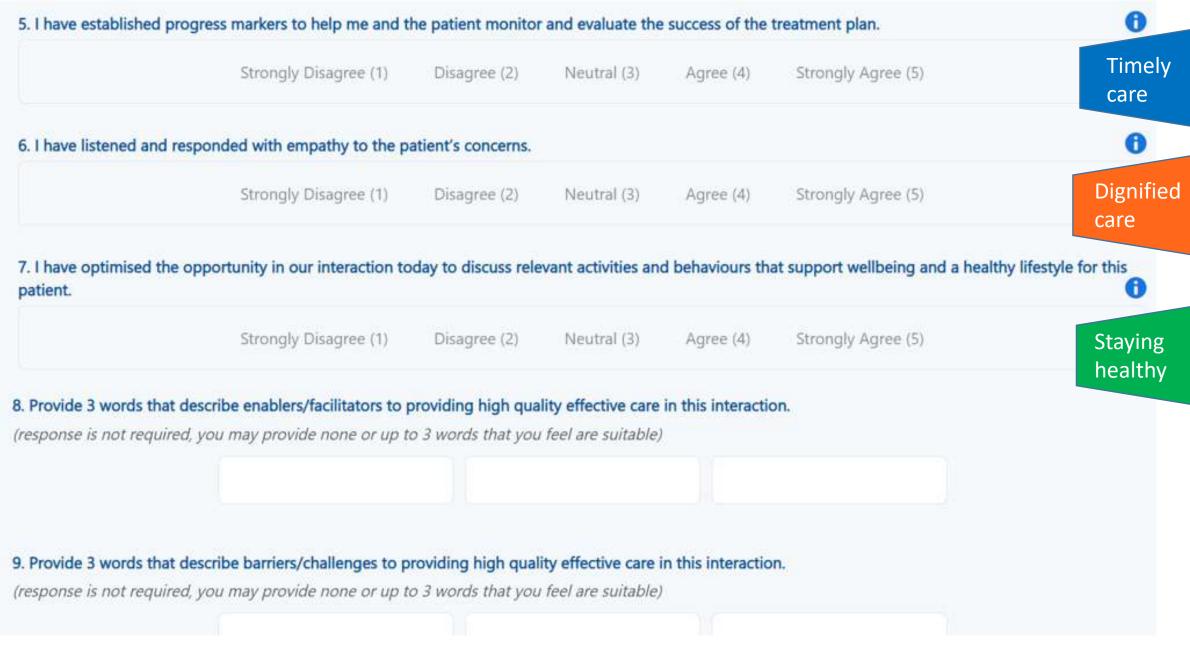


Complete your self-reporting by yourself or as part of a mentoring session. You and your managers can then use these useful meaningful insights to spark conversaions on how you and your department can improve and what areas are doing well and need to

he maintained



Is this submission as part of a mentoring session? To what extent do you agree with the following statements regarding your recent experience? 0 1. I am confident/reassured that I have screened for serious pathology to an appropriate level in this case. Safe Strongly Agree (5) Strongly Disagree (1) Disagree (2) Neutral (3) Agree (4) care 2. I have supported the patient with a shared decision making process to enable us to agree a management approach that is informed by what matters to 0 them. Individual Strongly Disagree (1) Strongly Agree (5) Disagree (2) Neutral (3) Agree (4) care 0 3. My reflection/discussion about this interaction has supported my development through consolidation or a unique experience I can learn from. Staff and Strongly Disagree (1) Disagree (2) Neutral (3) Agree (4) Strongly Agree (5) resources 0 4. I have applied knowledge of best evidence to the context of this patient's presentation to present appropriate treatment options to the patient. Strongly Disagree (1) Disagree (2) Neutral (3) Strongly Agree (5) Agree (4) Effective care



#BevanExemplar

Doing things differently for a prudent, sustainable recovery | www.bevancommission.org



Quick Summary Safe Timely Individual Healthy Dignified Effective Staff

79%

92%

83%

78%



84%

You have not completed a self-report in the last week.

It looks like you are happy that a satisfactory standard has been achieved for: Safe care, Individual care, Staying healthy, Dignified care, Effective care. Well done! You are hitting the target for these standards. You can help your colleagues regarding these standards.

It looks like there is an opportunity to improve confidence in meeting: Timely care, Staff and resources. You may wish to follow the i link (next to each respective question) to resources that you may find helpful.

It looks like you are not happy that a satisfactory standard has been achieved for: Governance, leadership and accountability. You are strongly advised to further discuss this case with a mentor or colleague to establish what further steps may need to be taken to address this.

#BevanExemplar

Doing things differently for a prudent, sustainable recovery | www.bevancommission.org

Enablers to providing high quality care



Barriers to providing high quality care

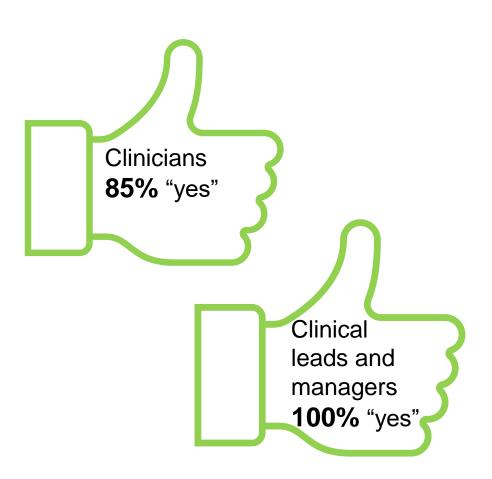
orthopaedic waiting times struggled to follow instructions previous in from healthcare health anxiety personal trainer - beliefs limited experience deconditioning apprehensive preconceptions too didactic complexity motivation expectations mobility longstanding beliefs clinical diagnosis unclear goals behaviours health literacy google school age less shared decisions complexity anxietv sedentary hurt is harmful family beliefs appointment time poor health education

User feedback





Do the statements appropriately represent clinical quality?



Feedback themes:

Better than existing notes audit process.

More representative of multiple dimensions of clinical quality.

More person centred.

Clinical quality is complex and difficult to measure comprehensively.

"makes you think about how you support the person rather than how neat your notes are" "Looks at what's important to us as clinicians and what matters to our patients"

"Better reflects clinical quality than notes audit"

What are the things you like about the CQA?

Themes:

Quick and easy to use

Meaningful and relevant

Encourages **reflection**

Organises data to inform personal and service development

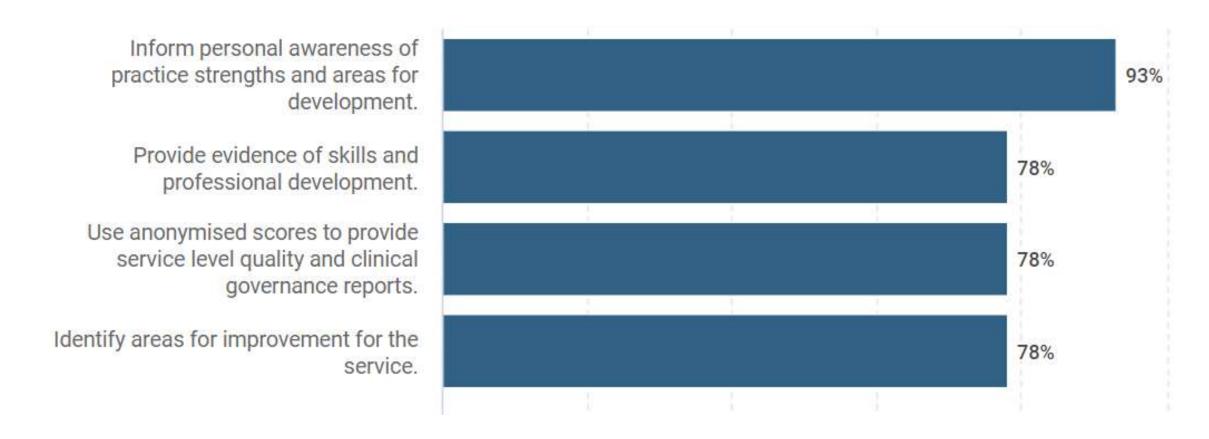
"Data can go somewhere and influence change"

"Data automatically shown in easy to read format"

"Questions are relevant for every interaction"

"Gives you feedback. A useful mentoring tool"

How should the CQA data be used?



What are the things you dislike or would change?

Themes:

Make it an **online health board application**Extend **logged in period**Option to add contextual **detail** to data sets

Option to add contextual **detail** to data sets Line graphs less popular than quick view dashboard

"The 3 words questions"

"Maybe add comments/ notes but I also like that it doesn't require that so its quick to do" "Make it easier to get to via an application link"

What are the barriers to using the CQA?

Themes:

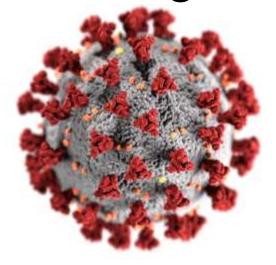
Need to form a new habit. Remembering to do it.

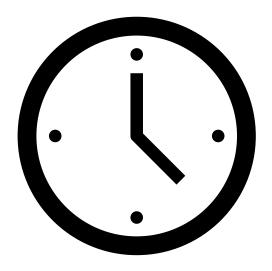
"Just remembering to do it, its really quick to do."

"Time, but that's not the app, that's just work"

"Getting into habit of using it."

Challenges









Conclusions CQA

Easy and Quick.

Aligned to recognised standards.

Meaningful to and valued by clinicians.

Maintains up to date quality data.

Facilitates reflection, discussion and improvement actions.

Saves time and money over traditional audit practices.



Future ambition

New and Improved CQA.

Update alongside reviewed Wales Health and Care Standards.

Support for adoption in health board applications.

Encourage colleagues to pursue Bevan Exemplar projects.



Comisiwn Bevan Commission





clare.connor@wales.nhs.uk

