

STRATEGY 2021 TO 2026

ST JAMES'S HOSPITAL PATIENT REPRESENTATIVE GROUP





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1.0 Introductory Statement

This St James's Hospital Patient Representative Group (PRG) strategic plan was developed to describe the group's vision and its priorities for action, to ensure that the function and activities of the group contribute effectively to improving patient outcomes and experiences of care and the delivery of compassionate person-centred services across St James's Hospital.

2.0 Executive Summary

The Patient Representative Group Mission Statement

The St James's Hospital PRG seeks to enhance the delivery of healthcare at St James's Hospital by listening to and empowering patients, family members and hospital staff and by fostering effective communication between everyone involved in each patient's care. We promote a culture of working in partnership and prioritise health and wellbeing and person centred care, to enable the delivery of the safest and highest quality care and service. We provide an avenue for the voice of the patient to be heard and contribute to improving services for other patients in the hospital.

The St James's Hospital Patient Representative Group Strategic Goals

- The patient voice will be heard and responded to
- Patients' experiences of care will be improved
- Patients' health and wellbeing will be protected and promoted
- Patients and staff will be helped to communicate and collaborate better
- The Patient Representative Group will sustain and increase its effectiveness

3.0 Background

The St James's Hospital PRG was formed in March 2016 following the reconfiguration of the long existing Patient Advocacy Group and its development was informed by national and international best practice. The PRG comprises of patients, relatives and carers and membership is on a volunteer basis. The representatives serve as an advisory resource for hospital staff and help them to see the hospital from the patient perspective. Representatives contribute their insights to quality improvement projects, policy and educational programme development, the design and testing of communication materials including information leaflets, the development of new services, facilities and infrastructural refurbishments. Monthly meetings are held in the hospital or virtually during the COVID – 19 pandemic and engagement with hospital staff is a core element of all meetings.

Since March 2016, the PRG has grown from strength to strength. Consistent membership and attendance have been maintained. The members have flourished and developed in their roles, looking forward into the future and wanting to ensure they can support the patients, staff and the St James's Hospital to the best of their ability, while improving their effectiveness and sustaining their role.

This is the first strategy to be developed by the group. It has been developed by the group to benefit all patients and families, the hospital and its staff and to guide the group's future work.

4.0 Development of the Strategy

The St James's Hospital PRG sought to develop a strategy that reflected the values of compassionate, person-centred service, was aligned to the hospital's vision and organisational objectives and was informed by national and international best practice. The PRG reviewed key publications including the hospital's strategy and annual reports and considered information about the hospital's services. It reflected on its own work in recent years and the themes of patient and family feedback to the Hospital. The members progressed the strategy through a workshop that was independently facilitated by Ms Caroline O'Regan, Executive Development Specialist, RCSI Institute of Leadership. The draft strategy was further developed in collaboration with Ms Maria Kane, the Hospital's Person Centred Care Lead, and Dr Una Geary, Director of Quality and Safety Improvement (QSID). The final draft strategy was circulated for consultation with the Hospital's CEO and Executive Management Group and the Quality, Safety and Risk Committee of the Hospital Board prior to its publication. The strategy sets out short and long term goals for 2021 to 2026, through which the group will monitor and evaluate the strategy's implementation.

5.0 Patient Representative Group Membership & Biography

Current Membership Biography Mr. Joe Bowden The members of the PRG combine their health care experience, skills, attributes, work experience, academic achievements and life experience to work as a cohesive and Ms. Orlaith Brennan inspiring team. Mr. Michael Foley There are no particular requirements for becoming a member of the council with the exception of having an experience as a patient, family member or carer of a patient who Mr. Peter Hartnett attended St James's Hospital. Notwithstanding this, the members bring a rich and varied wealth of experience to the council. Some live with a chronic disease, others Mr. Damien Nee received lifesaving surgery, some have been on a cancer journey, some have been Mr. Pat Rooney carers to family members or sadly lost loved ones who had received care in the hospital. Ms. Lora Ruth Wogu Their work experience ranges from working in health care, the pharmaceutical industry, trade unions, sales, the entertainment industry, IT, administration, being a trades person, an executive manager, an undergraduate and postgraduate lecturer, an international management consultant and running their own successful business. In addition to volunteering for the patient council they generously contribute to many

social groups and causes. Some are community activists, environmentalists, volunteers

in support groups, work with vulnerable community groups. Others coach and mentor

youngsters in the GAA, are involved in the Toastmasters organisations and bridge club committees, are involved in politics at local, regional and national level. One member has been the Irish National Expert for European Families and Work Network of the European Commission.



We also acknowledge the contribution of Ms. Rosanna Farrell, Ms. Sheila Elmes and Mr. Derek Ward who volunteered their time to the Patient Representative Group for a number of years and contributed to this strategy.

Top row: Mr Damien Nee, Mr Peter Hartnett, Ms Orlaith Brennan Bottom row: Mr Joe Bowden, Ms Lora Ruth Wogu, Mr Michael Foley, Mr Pat Rooney

6.0 Organisational Structure

The PRG is part of the hospital's Person Centred Care Programme and is supported administratively by the QSID Team. The group's work is reported to the Executive Management Group (EMG), CEO and the Hospital Board through the hospital's Director of Quality Safety and Improvement.

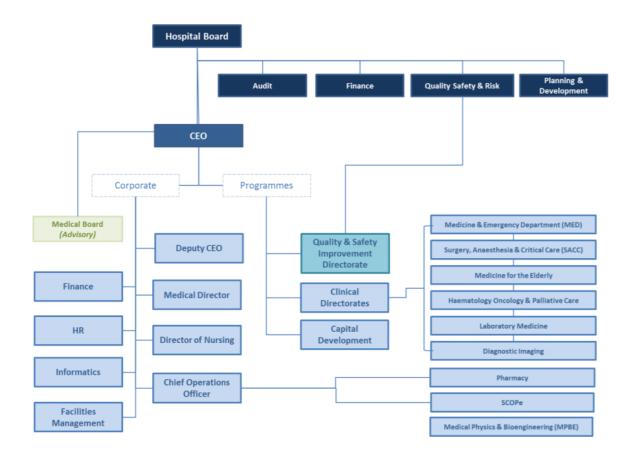


Figure 1: St James's Hospital Governance Structure

7.0 St James's Hospital Vision, Purpose & Values

The PRG considered the Hospital's stated vision, purpose and values in developing this strategy.

Vision

To be a leading healthcare organisation, nationally and internationally, improving health outcomes through collaboration and innovation.

Purpose

To provide the best care to every patient through our personal and shared commitment to excellence in clinical practice, education, research and innovation, while fostering our partnership with Trinity College Dublin.

Values

Patients matter most to us. We provide care that is safe, effective and accessible so that our patients achieve the best possible outcomes and experiences of care.

Respecting people. Being kind and honest, promoting diversity, collaboration, personal and professional development.

Innovating and sharing knowledge. We learn, teach, research and innovate to improve health and well-being.

Using resources wisely. Delivering value, working efficiently and protecting the environment.

Figure 2: St James's Hospital Statement of Purpose (2014)

8.0 Patient Representative Group Mission Statement

The PRG seeks to enhance the delivery of healthcare at St James's Hospital by listening to and empowering patients, family members and hospital staff and by fostering effective communication between everyone involved each patient's care. We promote a culture of working in partnership and prioritise health and wellbeing and person centred care, to enable the delivery of the safest and highest quality care and service. We provide an avenue for the voice of the patient to be heard and contribute to improving services for other patients in the Hospital.



Figure 3: Patient Representative Group Mission Statement

9.0 Analysis of Current Activities

The activities of the PRG are varied. The table below outlines some examples of matters the members are involved in. Involvement in these matters is determined by invitation to participate by hospital staff and services on as needed basis. This is not a comprehensive list of activities.

	Example
Feedback	Review of patient information leaflets
Perspective	Contribution to the 'Development of the National Guideline for the Administration of Intravenous Medicines by Health Care Professionals'
Education	Sharing the patient experience at the hospital's Nursing Research Conference
Research	Co -design of antimicrobial stewardship research, Pharmacy PHD
Accreditation	Meeting the Cancer Institute accreditation body (OECI)
Governance	Person Centred Care Governance Committee membership

Table 1 – Examples of Patient Representative Group activities

10.0 SWOT Analysis of the Patient Representative Group

Strengths

- -Volunteers, willing participants
- Support from QSID
- Authentic patient voice
- In demand from staff & services

Weaknesses

- Volunteers, time limited
- Self selecting, may lack diversity
- Recruitment and retention
- Reactive rather than proactive

Opportunities

- -Remain focused on current activities and aim to add 1 to 2 practical projects per year
- Bring the Patient Voice into the Hospital's current and future strategies through greater engagement with the Hospital Board
- Set an example for Patient Groups
- Influence National Policy

Threats

- Resourcing small number of members, spread very thinly, difficult to absorb increasing demands
- Recruitment and succession
- Lack of clarity on role and value

Figure 4: PRG SWOT Analysis

11.0 Goals

The PRG members are cognisant of the need to continue and build on the work we have been involved in to date. It is time to move from consultation to true partnership and shared leadership on the continuum of engagement (See Figure 5). The PRG role should be expanded to be more strategic in addition to being operational.

The members also acknowledge the need for patient engagement at national level. Influencing National policy is desirable and a future objective. The ability to influence regional and national policy will inevitably have an impact on person centred care in St James's itself. However, it is acknowledged that developing the PRG and increasing engagement at strategic level within the Hospital must be prioritised.

Hence, the PRG proposes to focus its involvement at both local and corporate level, with a longer term view to increasing national involvement and influence.

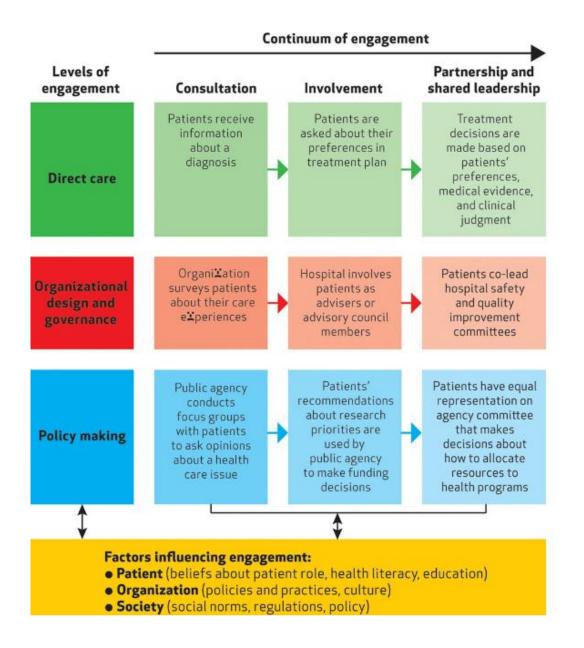


Figure 5: Kristin L. Carman et Al (2013) A multidimensional framework for patient and family engagement in health and healthcare.

The St. James's Hospital Patient Representative Group has identified the following priority goals for its strategy.

- The patient voice will be heard and responded to
- Patients' experiences of care will be improved
- Patients' health and wellbeing will be protected and promoted
- Patients and staff will be helped to communicate and collaborate better
- The PRG will sustain and increase its effectiveness.

11.1 Listening and Responding to the Patient Voice

The hospital has existing structures in place for receiving feedback from patients and their relatives. The PRG wishes to improve engagement by patients with those existing structures and optimize how any patient or relative can provide feedback. If the PRG is to represent the patients' experiences and perspectives they acknowledge their requirement to listen and respond to patients. The PRG wishes to interact more with patients and listen to them, to identify their issues of concern and appreciate the true experiences of patients attending the hospital. In particular those living in the communities surrounding the hospital, the vulnerable and marginalised members of society and those who struggle to have their voice heard. In addition to their own experiences as patients this information will give the PRG members the knowledge of other experiences. This is a driver for improving patient experiences and the quality of care as outlined in the HSE Framework for Improving Quality (2016). This wealth of knowledge will be shared when PRG members engage with hospital staff and will inform decisions at executive and hospital board level, bringing the voice of multiple patients into service design, governance and policy making in the hospital.

11.2 Improving Patients' Experiences of Care

The PRG encourages the hospital and its staff to keep Person-Centred Care (PCC) practices at the forefront of everything that is done in the hospital. The PRG would like to see PCC driven by frontline workers, executive management and the Hospital Board alike and better represented in the public face of St James's Hospital.

The PRG members currently contribute to improving services and patient experiences when we make suggestions to staff based on their personal experiences. We wish to raise this involvement to a partnership level through more active engagement in the hospital's governance and management structures. This will ensure that the PRG strategy and work are in line with the hospital's strategy. The group seeks to become involved in the monitoring and improvement of the quality of patient care. The group seeks to become more aware of measures of quality and safety in the hospital, findings within reports and other information about the hospital's services that reflect issues of patients' concern.

11.3 Protecting and Promoting Patients' Health and Wellbeing

The PRG wishes to help patients to achieve the best health and wellbeing possible through the care they receive in St James's Hospital's services. This means patients' being involved in decision-making and owning their own health and healthcare, thinking holistically about their illness and having the skills to navigate the health system, communicate effectively with staff and utilise new technologies.

The PRG emphasises that the hospital should strive to be a health promoting hospital. As a centre of excellence, the hospital should be seen as a valuable resource for information about health and wellbeing. The hospital's website and other communication platforms can be "go-to" sources of information for patients and the general public about living a healthier life, preventing ill health, Healthy Ireland, as well as providing good information about illnesses and procedures. The hospital should use all possible means to reach out to communities beyond the hospital campus.

11.4 Better Communication and Collaboration

The PRG values the opinions and experience of both patients and staff. Increasing and widening our engagement with staff is an important goal for the group members. We recognise the vast experience of the staff and their ability to educate and guide the group deliberations. Working in partnership and cooperation with staff will be critical in aiding the PRG to achieve change and implement this strategy.

The PRG promotes effective interactions between health care professionals, patients and their family members. The group emphasises the importance of listening, hearing and responding during all types of engagement from clinical consultation to governance committee meetings. The health care provider has a responsibility to enable understanding by communicating in language that is free of medical jargon and easy to understand.

The group recognises the power of receiving positive feedback and appreciation in empowering and motivating hospital staff and the need to celebrate the care provided by staff, the work they preform and the successes they achieve.

11.5 Being an Effective Patient Representative Group

The HSE has long since recognised the collaborative, rather than representational nature of the work performed by groups such as the PRG, as is reflected in its guidance on the establishment of patient councils. Members bring an informed perspective to the group and a willingness to collaborate, along with their individual skill set which they make available to the hospital for the purpose of improving the patient experience. The members may not be representative of all the patients of the hospital and have decided, for this reason, to review the group's title and consider revising the name to accurately reflect their role in the hospital. The members will continue to work in collaboration with the hospital to promote and develop patient-centred care.

While the value of the PRG has been reported by frontline hospital staff, the group believes that they can also be of value to the Executive Management Group and Hospital Board by bringing the patient voice to both operational and strategic activities. As we capture more feedback from patients and their family members it will enable us to share the perspectives of a wider patient voice.

The need for enhanced induction and training has become self-evident. Patients and family members are invited to become involved in the patient council and then feel obliged to try to work effectively in a complex organisational setting with a wide-ranging brief that can be challenging. The group recognises members cannot be expected to slot seamlessly into such an environment.

PRG members often need to read documents and prepare in advance of meetings. Being a PRG member involves a significant time-commitment and the scheduling of meetings during office hours may preclude some patients and family members from participating in the group because of their work commitments.

The current level of engagement and complement of members can sometimes result in the PRG operating at or close to capacity. Hospital staff and services experience delays in accessing meetings with the members. The PRG has identified the need to ensure a diverse, increased and sustainable membership.

The PRG is committed to measuring progress towards full implementation of the strategy and to engage on an ongoing basis with the hospital's staff, management team and board to enable this strategy to be delivered as an element of the hospital's overarching and longer-term strategic vision.

12.0 Patient Representative Group Strategy Milestones

The PRG members have mapped the goals and enabling actions from the current 'as-is' status to achievement of a 5-year strategic vision, with specific actions prioritised for the first year of the strategy's implementation and longer term goals to be commenced within three to five years. The PRG will formulate an annual work plan which will identify the desired objectives for each year in line with the goals set out in the strategy. The annual goals and objectives will be audited and evaluated annually to monitor their implementation and effectiveness.

Listening and Responding to the Patient Voice

Current status	Short Term Goal	Five Year Goal
	(12 months)	(3 - 5 years)
Members draw on their own	Undertake an evaluation of the current	Co-design a pan hospital process for patients to
personal experience to provide	methods for patients and relatives to	formally provide feedback at the time of discharge or
feedback to hospital staff. The	provide feedback. Identify gaps and	other hospital contact. This must include methods to
hospital's National Patient	opportunities for improvement.	ensure the patients who are more vulnerable or
Experience Survey results and		marginalized in society are heard.
complaints themes are reported		
to the members.		
	Work with the QSID to develop more	Co-design a method for the PRG to receive feedback
	effective means of sharing existing	from patients and families (e.g. comment cards,
	streams of patient feedback with the PRG	electronic portal, visit wards).
	and awareness of service improvements	
	prompted by patient feedback.	

Improving Patients' Experiences of Care

Current status	Short Term Goal	Five Year Goal
	(12 months)	(3 - 5 years)
Monthly meetings with staff	Inclusion of PRG business on Hospital	Participate in the hospital's monitoring and
providing feedback on services,	Board agenda and engagement with the	improvement of quality.
information materials,	Quality, Safety and Risk board sub-	
developments.	committee.	
Participation in staff education,	Assist in developing a patents' handbook,	Engage with the hospital to assist them in recognizing
research projects, accreditation	manual or other information resources so	the role of family members as patient advocates and
visits and governance	that patients understand how the Hospital	identifying ways to support the inclusion of family
committees.	works and what they should expect.	members in communication with the patients' health
	Including information on PCC and what it	care providers and in the patient's health care journey.
	means for their treatment/care.	
	Contribute to the implementation of an	
	"Audit Loop" to ensure the recommended	
	actions from feedback are implemented.	
	Co-design an evaluation of service quality	
	improvements.	

Protecting and Promoting Patients' Health and Wellbeing

Current status	Short Term Goal	Long Term Goal
	(12 months)	(3 - 5 years)
The PRG highlights the	Undertake an evaluation of how the	The hospital website is a resource for health and
importance of health promotion at	hospital promotes and shares health,	wellbeing information for patients and members of the
every engagement opportunity	wellbeing and Healthy Ireland information	public.
they have with hospital staff.	and how to help patients to continue to	
	support their own health and wellbeing on	Develop a network of local smaller patient groups
	an ongoing basis.	throughout the hospital, specific to services, units,
		specialties or illnesses. The PRG will provide peer
		support to members.

Better Communication and Collaboration

Current status	Short Term Goal	Long Term Goals
	(12 months)	(3 - 5 years)
Dedicated 3 hour monthly PRG	Post a quarterly PRG messages to	Develop a PRG and hospital Staff event. E.g. evening /
meetings which facilitate	hospital staff, circulated via the hospital	forum with staff to engage and listen to each other.
engagement with small number	communication systems.	
of clinicians and managers.		
		Create a system or event to celebrate and share
		positive feedback and staff successes.
		Influence the training of healthcare staff, based on lived
		and learned experiences.
		Promotion of good communication and the use of plain
		English.

Being an Effective Patient Representative Group

Current Status	Short Term Goal	Long Term Goal
	(12 months)	(3 - 5 years)
The PRG received very positive	Undertake an evaluation of the current	Expand the role of the group to contribute to the
feedback in a survey of staff that	workload, capacity, structure and decision	hospital's strategic discussion and development.
interacted with the group.	making process of the PRG.	
	Review the group's title to ensure the	Collaborate with the HR Directorate in conducting a
	name accurately reflects the group's role	training needs assessment or the PRG members and
	in the hospital.	develop a tailored training programme.
	Optimize the induction training provided to	Increase resources to support and enable the strategy
	new PRG members.	goals, this includes additional administration and
		Quality Manager function.
	Secure PRG membership of the Quality	Recruit new members and encourage diversity of
	Safety Risk Hospital Board Sub-group.	membership.
		Facilitate those in employment to be members of the
		PRG through the National leave from work initiative and
		alternate meeting times.
	Formulate an annual work plan. Identifying	Undertake regular PRG performance evaluation.
	objectives for each year in line with the	
	goals set out in the PRG strategy.	
		Share learning and experience of the PRG at national
		level.

13.0 Conclusion

The St. James's Hospital Patient Representative Group is pleased to present this strategy to guide and direct its future work. It is intended to be progressed in alignment with the Hospital Board's future strategy for the Hospital. The PRG will welcome opportunities to become ever more engaged with patients and families, the hospital and its staff to further improve the safety, quality and experiences of care provided by St James's Hospital.

The members recognise that strategy design is a continuous process. In this first phase, the focus was identifying overarching goals and timescales, namely the 'what' and 'when' aspects of the strategy. In the next phase, it is expected that the emphasis will be concentrated on 'how' the selected goals will be achieved and evaluated and this will be reflected in the PRG annual work plans.

The PRG would wish to thank Professor Mary Day, CEO St James's Hospital and Mr Lorcan Birthistle, former CEO and Ms Caroline O' Regan, Executive Development Specialist, RCSI Institute of Leadership for their support in the development of this strategy.

The PRG members would also like to thank Dr Una Geary, Ms Maria Kane and Ms Siobhan McDonald for all the support, assistance and guidance which they provided during the strategy development process. This was all provided while being careful to avoid any possibility of influencing the thinking of the PRG members.

Participating in this exercise was a very enlightening experience and will enable the members to make a more constructive contribution to person centred care and patient and staff wellbeing in St. James's Hospital.

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