ARISE

The Wessex Patient Safety Collaborative model for patient engagement

**Aims**
- What are the aims of this engagement process
- What are the roles for patients: Strategic, Operational, Project, Administrative, Consumer Advisers?

**Recruit**
- How to identify and recruit the patients
- How to identify and use local patient networks

**Support**
- To ensure patient representatives receive appropriate support
- To ensure patient representatives can access appropriate development opportunities

**Evaluate**
- To evaluate progress
- To continually improve patient engagement practice

**Integrate**
- Patient representatives to be equal and effective partners with staff
- Staff to be equal and effective partners with patient representatives

Geoff Cooper - Patient Safety Collaborative Manager
When patients are ignored, they are most at risk

Robert Francis - February 2013

The NHS should be ‘engaging, empowering and hearing patients and theirs carers all the time’. The most important goal of a modern health service is to listen and act: this is the essence of care – and to do so transparently so that poor patient experience does not go undetected and excellence can be celebrated. (Don Berwick)

NHSE - December 2013
The ‘Ladder of engagement’ is a framework for understanding different forms and degrees of patient and public participation.

The Engagement Cycle is a strategic tool that helps commissioning teams understand how to engage communities, patients and the public at each stage of commissioning.
Co-design and Co-production

- Local engagement through structured quality improvement initiatives leading towards transformational change
- Building system-wide capability for both staff and patients in quality and safety improvement
- Local systematic spread of quality improvement outcomes across health and social care
- Networking between AHSNs and their partner organisations / stakeholders to ensure the optimal spread of locally developed solutions & interventions
- Active contribution to national sharing and learning

- Ensuring patients and carers play a fundamental and active part in planning
- Demonstrating ongoing patient/carer voice and participation in all Patient Safety Collaboratives and with any other relevant stakeholders
Breakthrough Series 1
2015 - 2016
Wessex Patient Safety BTS1 Collaboratives
Sepsis and Transfers of Care
COME OVER HERE
The ARISE model has been developed by a working party of Wessex PSC organisations based on their experiences of attempting to develop patient engagement across a year long Breakthrough Series project.

The model supports the process of patient engagement from the “why do it”, through the “how to do it” to the “how well did we do it”.
Engagement and Empowerment

Engagement

Empowerment

Individual

Representative
Engagement and Empowerment

Empowerment

Engagement

Individual

Representative
Aims

Co-production Core Principles
- Recognising people as assets
- Building on people’s existing capabilities
- Promoting mutuality and reciprocity

- Developing peer support networks
- Breaking down barriers between professionals and recipients
- Facilitating rather than delivering
ARISE model for patient engagement – Step 1: Aims

Using the ARISE model will help organisations and teams address questions such as:

- What do we want our patient representatives to do?
- How can we assess our culture, identify good practice and address coercive behaviours?
- Do we know where the patient representatives are in our organisation and what do we do if we don’t?
Who would be the representative?
ARISE model for patient engagement – Step 2: Recruit

Using the ARISE model will help organisations and teams address questions such as:

• What is the best selection / appointment process for patient reps?
• Should our patient reps be remunerated?
• Can one patient represent any other / all patients?
• How do we allow for differences in staff attitudes and patient rep background?
Integrate – 4Pi

Partners:
- NSUN: the National Survivor User Network
- Afiya Trust
- Social Perspectives Network
- Mental Health Foundation
ARISE model for patient engagement – Step 3: Integrate

Using the ARISE model will help organisations and teams address questions such as:

• Are Patient Engagement difficulties due to a knowledge gap or an implementation gap?
• How can we help our teams to work together, improve multidisciplinary communications in meetings and consider whether there is a need to establish role boundaries?
Support

TNA is a tool to identify the gap

Existing
- Skills
- Knowledge
- Attitudes

Required
- Skills
- Knowledge
- Attitudes
ARISE model for patient engagement – Step 4: Support

Using the ARISE model will help organisations and teams address questions such as:

- What are the development and support needs of our patient reps?
- How can we train / coach / educate our patient reps?
- What resources are available to help us develop patient reps?
TIME TO EVALUATE
ARISE model for patient engagement – Step 5: Evaluate

Using the ARISE model will help organisations and teams address questions such as:

• Have we met our aims and objectives for our project?
• Have we achieved meaningful engagement between professionals, people using services, their families and their neighbours?
• Have our patient representatives been empowered to work as equal and effective partners in the project?
What Next?

Breakthrough Series 2

The (Physically) Deteriorating Patient
“I can do things you cannot, you can do things I cannot; together we can do great things”
Mother Teresa
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