



The Yorkshire Patient Experience Toolkit is a research-based approach for teams to work with patient experience feedback to improve services. It was developed in collaboration between the Yorkshire Quality & Safety Research Team, the Y&H Improvement Academy, hospital staff and patient volunteers. We've recently added the + symbol to indicate how it has developed to focus on staff as well as patient experience, seeing them as intrinsically linked.

### Case study: Sir Robert Ogden Macmillan Centre (SROMC), Harrogate



'The Sir Robert Ogden Macmillan Centre (SROMC) provides high quality cancer treatments and health and wellbeing services. It offers support for people affected by a cancer diagnosis in the Harrogate and rural district community, as well as some patients from the north Leeds area'  
(<https://www.hdft.nhs.uk/services/cancer-services/sromc/>)

In summer 2021, Improvement Academy staff talked to 8 patients and 10 staff about their experiences of being treated at, or working at the clinic, collated this information and shared it with the whole staff team.

#### The patients said the team were:

*'Absolutely wonderful; remarkable kindness; courtesy; they are brilliant 'the people have made an awful thing into something quite positive'. But they said that when treated outside of the Centre patients lose trust, feel excluded - a small fish in a big ocean, feeling less well known, less well understood and that this can create anxiety.*

**About working in this team, staff said they are:** "clinically brilliant", "provide excellent service" "very supportive place to work", "I feel privileged to work with the lung team", "teamwork (through pandemic) has actively boosted morale for everyone".

This strong and cohesive team were very keen to address any patient concerns.

#### What staff did:

Obtained a baseline measure as to how many patients in hospital wards were currently not being seen cancer nurse specialist (CNS) acute oncology team (AOT) or palliative care team (PCT) during their admissions. They found that 87.2% of patients ARE actually seen and this was encouraging. Staff agreed an improvement aim of 95%.

#### Tests of change (underway):

- IT alerts for patients admitted
- Length of time for SROMC staff to sift alerts to identify patients for visit
- Patient leaflet (when admitted) explaining support to be received from SROMC

For more information contact: Improvement Academy [academy@yhia.nhs.uk](mailto:academy@yhia.nhs.uk)