# Always Events® Supporting Materials

# Measurement and Data Collection: Template Plan

## Introduction

Measurement is an important part of implementing your Always Event. Demonstrating the impact of your Always Event will be important for **communicating the value of the work** to others which can help **sustain the work.**

Measurement will help you identify, in a rigorous and systematic way, whether the changes you are testing as part of your Always Event are:

* having a positive impact on the thing you want to improve
* not having a negative impact on anything else

Always Events® must meet four criteria. The importance of measurement is evident in the following two:

* Always Events® must be **measurable** - it should be possible to determine whether or not the process or behaviours occur reliably. You will need to use **process measures** to assess progress regarding reliable implementation.
* Always Events must also be affordable and sustainable. Once the process has been reliably implemented the change needs to be sustained. You should use **outcome measures** to provide leaders and frontline staff with feedback on their progress. Outcome data showing the improvement should also be shared with patients/service users; this will show that the organisation values what matters most to them and the importance of co-designing service improvements.

Before collecting data it is important to consider a number of key questions. This document provides a template framework to help think through and develop your process, outcome and balancing measures.

# Process measures

What measure(s) will show whether you can implement the change(s) reliably, for every patient/service user?  Are the parts or steps in the system performing as planned?

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| ***What to consider*** | | **Your plan** |
| **What process measure(s) will you use?** | *Are there any existing measures that can be used or adapted to record the process of implementing your change(s)?* |  |
| **When and how will the data be collected?** | *Frequency (daily, weekly, monthly). This will partly depend on the activities being implemented and the stage of implementation. You may wish to collect data more regularly at first until you’re confident that your change(s) are being implemented reliably for every patient/service user (i.e. embedded).*  *Can data be collected as part of an existing process? If so, at what step?* |  |
| **Who will collect the data?** | *It is important the person or team responsible for collecting the process data have the capacity and necessary skills.*  *Ideally recording/collecting data that shows the change(s) is being implemented reliably should be built into a person/team’s everyday role* |  |
| **Who will examine the data?** | *It is important that someone takes a lead on reviewing the data collected and is able to establish if your Always Event activities are being implemented as planned for each patient/service user in your pilot ward/area.* |  |
| **How and when will the findings be shared?** | *It is important that the improvement team is able to take action on the results and shares them with the frontline team and with the executive sponsor or senior lead on a monthly basis.*  *If the process is not being implemented reliably then the team need to determine with frontline staff what the challenges are and how they might be overcome.* |  |

# Outcome measures

What measure(s) will show whether your aim statement is being met?

It is important to have evidence to show the Always Event is having a positive impact on patient/service user experience.

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|  | ***What to consider*** | **Your plan** |
| **What outcome measure(s) will you use?** | *Your measure(s) should focus on patient/service user experience and should enable you to assess progress against the target set in your aim statement.*  *Are there any existing measures that can be used or will new data need to be collected? Existing local or national user experience measures e.g. Friends and Family Test, patient-reported experience measures. Note: check the results can be broken down to the level of the pilot unit/ward/service.*  *New locally-designed measures e.g. patient and/or carer diaries, interviews* |  |
| **When will the data be collected?** | *Measurement needs to take place before, during and after implementing your Always Events activities.*  *Measuring before implementation (either using existing or new data) will provide a baseline against which any improvements can be measured.* |  |
| **Who will collect and analyse the data?** | *It is important the person or team responsible for collecting the data are involved at an early stage in the process and have the capacity and necessary skills*  *Can you draw on the resources from other teams, such as a trust-wide patient experience or quality improvement team?*  *Has your trust got a volunteer network that could help with data collection?* |  |
| **Who will receive and review the results?**  **How often?** | *It is important that someone takes a lead on reviewing the outputs and is able to take action on them.*  *Share results with the frontline staff, the point-of-care improvement team (which includes the patients, carers and service users involved in the co-design), the executive leader and oversight team.* |  |

# Balancing measures

What measure(s) will show whether your change(s) have any unintended impacts?

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|  | ***What to consider*** | **Your plan** |
| **What balancing measure(s) will you use?** | *This is about understanding what is happening to the system, for example impacts on staff workload/experiences or finances. Example measures include:*   * *Staff experience survey or staff interviews* * *Staff workload measures e.g. time logging* * *Checking budgets* * *Recording readmission rates (if your change is focused on improving discharge)*   *Are there any existing measures that can be used or will new data need to be collected? Existing local or national measures e.g. Staff Friends and Family Test. Note: check the results can be broken down to the level of the pilot unit/ward*  *New locally-designed measures e.g. staff interviews* |  |
| **When will the data be collected?** | *Measurement needs to take place before, during and after implementing your Always Event activities.*  *Measuring before implementation (either using existing or new data) will provide a baseline against which any changes to the system can be measured.* |  |

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| **Who will collect and analyse the data?** | *It is important the person or team responsible for collecting the data are involved at an early stage and have the capacity and necessary skills*  *Can you draw on the resources from other teams, such as a trust-wide patient experience or quality improvement team?* |  |
| **Who will receive and review the results?**  **How often?** | *It is important that someone takes a lead on reviewing the outputs and is able to take action on them.*  *Share results with the frontline staff, the improvement team (which includes the patients, carers and service users involved in the co-design), the executive leader and oversight team.* |  |