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Patient involvement in healthcare projects: A mixed method study on the perspectives of project staff in Western Australian (WA) public hospitals and health services

Melanie Wright

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**PATIENT INVOLVEMENT IN HEALTHCARE PROJECTS: A MIXED METHOD  
STUDY ON THE PERSPECTIVES OF PROJECT STAFF IN WESTERN  
AUSTRALIAN (WA) PUBLIC HOSPITALS AND HEALTH SERVICES**

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A thesis submitted in fulfilment of the requirements for the degree of  
Master of Philosophy (Nursing)

School of Nursing & Midwifery

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This thesis is the candidate's own work and contains no material which has been accepted for the award of any degree or diploma in any other institution.

To the best of the candidate's knowledge, the thesis contains no material previously published or written by another person, except where due reference is made in the text of the thesis.

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## ABSTRACT

**Background:** the benefits of patient involvement in clinical care and research is well described in the literature; but there is little evidence to suggest that involving patients in the planning and delivery of healthcare projects is beneficial to the outcomes of the project.

**Purpose:** this study explores the perspectives of staff who were specifically employed to lead and manage healthcare projects in Western Australian (WA) public hospitals and health services, regarding patient involvement in their projects and the perceived benefits and barriers of this involvement.

**Study design:** the study was designed using a sequential mixed method approach in three phases : Phase 1 was the quantitative phase which comprised a survey ; Phase 2 was the qualitative phase using a semi-structured focus group; and Phase 3 was the data synthesis phase where data from previous phases were reviewed and analysed to check for convergence or divergence.

**Methods:** an internet-based questionnaire was distributed via email to project staff working in five public health services in Western Australia (n=100). Themes were generated which formed the questions for the focus group discussion (n=10).

**Results:** Thirty project staff participated in the questionnaire (n=30) and four project staff attended the focus group (n=4). Project staff perceived that patients do add value to healthcare projects; although, the findings indicate that they were not involving patients in all projects and there is no guiding framework for practice. The level of the project staff in the organisation, based on position title, had an association as to whether they involved patient in their projects or not (n=27;  $p=0.046$ ) ; and consequently the number of patients that were involved (n=18;  $p=0.035$ ).

There was also an association found between Six-Sigma qualified project staff and patient involvement (100%), as well as project staff who used Six-Sigma methodology in their projects ( $n=27$ ;  $p=0.026$ ).

Staff described the benefits and barriers of patient involvement, and although they were confident to involve patients, they lacked the skills and training required and some described a level of fear and anxiety with this approach. Staff also described a genuine intent to measure and evaluate patient involvement in their projects but lacked the reporting tools required to facilitate this.

**Conclusion:** for health service providers to optimise and manage genuine patient involvement in healthcare projects, they need to invest in staff and patient training, and develop associated policies, frameworks, evaluation tools and reporting mechanisms that are embedded into the organisational culture. There is currently a gap between organisational intent to actively involve patients in healthcare projects and translation of this into practice at a meaningful level.

**Key words:** mixed methods; patient involvement; staff perspectives; healthcare; healthcare projects.

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## LIST OF ABBREVIATIONS/TERMS

Abbreviation/term	Meaning
ACSQHC	Australian Commission on Safety and Quality in Health Care
CAC	Consumer Advisory Committee / Council
CAHS	Child and Adolescent Health Service
CSR	Clinical Service Redesign - a project improvement methodology which utilises DMAIC methodology
DMAIC	Define, Measure, Analyse, Improve, Control methodology used in CSR projects
DoH	Department of Health
EMHS	East Metropolitan Health Service
GEKO	Governance, Evidence, Knowledge, Outcomes. This software is used to record and manage local Quality Improvement projects within WA Health services
LEAN	A project improvement methodology to maximise customer value while minimising waste
HSP	Health Service Provider
MSIP	Medical Service Improvement Program
n=	Sample size – number of project staff within this study
N=	Population size - number of project staff in WA Health
NMHS	North Metropolitan Health Service
NSQHSS	National Safety & Quality Health Service Standards
SIX-SIGMA	A statistical project improvement methodology to reduce variation
SMHS	South Metropolitan Health Service
p value	Mathematical probabilities of statistical significance
PDSA	Plan-Do-Study-Act: a preferred model used to manage Quality Improvement projects
PMBOK	Project Management Body of Knowledge which is a project management methodology
PMP	Project Management Professional
PPI	Patient and Public Involvement
PRINCE2®	DoH chosen methodology for project management – means <b>PR</b> ojects <b>IN</b> <b>C</b> ontrolled <b>E</b> nvironments; version 2
QI	Quality Improvement
RGS	Research Governance Service system – internet-based Department of Health system for all research applications
UK	United Kingdom
WA	Western Australia
WACHS	Western Australia Country Health Service
WA Health	Western Australia public health service