

Mentor Information: Wider Patient Engagement (WPE) Activity Examples (2017)

Please consider the following Wider Patient Engagement (WPE) activity examples undertaken by some of our student nurses. These will provide you with some ideas on how some of our student nurses have considered and chosen their WPE activity choice. The examples include details on how student nurses have evidenced their WPE activity for their OAR Domains and E-Portfolio. WPE is totally non-clinical activity. Wider Patient Engagement' (WPE) is much more about undertaking activities with patient groups / support groups / patient representation organisations either face to face or virtually. The aim of WPE is for nursing students to develop wider knowledge of what matters to patients and their families in terms of their health / health conditions/ experiences of care. WPE also focuses on gaining a greater understanding of how patients' concerns are acknowledged and addressed by health care service organisations and the changes which are made /not made as a result.

Example 1:

- Student A used her unique log in details with Patient Opinion (PO) to find out more about patient stories during year 1. This was recommended during the Patient Opinion Webinar in her first module to learn more about patient experiences. During each of her placements in year 1, she logged in and accessed PO resources related to specific care specialities locally, regionally and nationally. This provided student A with a greater understanding of the type of experiences patients and their families have care settings related to the clinical specialities. The student developed some knowledge of how varied patient experiences are and also diverse levels of responses that were provided to these individuals. Student A began to understand some of changes which were made by health care organisations as a result of responding to patient feedback (Virtual WPE). Student A was able to undertake her virtual WPE at different times throughout the academic year and found this very useful for research into different patient and carer experiences in different care settings. She produced some reflective accounts for her E Portfolio throughout the year as evidence of 'responding to the patient voice' which she linked to recommendations from the Francis Report (2103). This was discussed with her personal tutor after the each placement and at the end of the academic year.

Example 2:

- Student B undertook some background reading about patient representation groups (PPGs) in his local area during year 1. At the start of year 2, he decided to contact his own GP surgery to request joining his local PPG. This involved attending PPG meetings (2 hour duration) every 3 months (6.00 – 8.00 PM). It required Student B to negotiate with his personal tutor and nurse mentors during the clinical placement periods to attend the 4 meetings throughout the year. He attended 2 meetings on theory days which did not require negotiation. 2 meetings occurred during the placement periods which her negotiated leaving his shift at 5.00PM on the long days. His nurse mentors were supportive and understood how Student B was planning to link these experiences to his OAR Domains and provided evidence of his WPE for his E-Portfolio. Student B saved the PPG Agenda and Minutes to his E Portfolio (consent from the Practice). This included evidence of his contribution and

discussion at the PPG meetings. Student B also contributed to a patient survey activity with other PPG members. This resulted in changes being made to improve to the patient experience of accessing GP Practice appointments. Student B also attended a local meeting to find out how health and social care organisations were communicating with the local population regarding the NHS Sustainability and Transformation Plan (STP). He contributed to some of the discussions with representatives from the Clinical Commissioning Group to find out more about potential proposals to save millions of pounds by 2020-21. Student B wrote up the main issues raised by public and patients at the meeting and the responses made. He was able to reflect on this experience of gaining greater insight in to how patients and the public voice is communicated and how health and social care organisations response to their concerns.

Example 3:

- Student C wanted to find out more about patient experiences and support after experiencing bowel cancer surgery in the county when she was on a surgical placement at the beginning of year 2. She undertook web searching to find out more about patient support groups in the county. Student C had also contacted the colorectal specialist nurse in her local NHS Trust and arranged to meet to discuss finding out more about the patient and carer experience following discharge from hospital. She had read a few 'patient stories' online from patients and their family members who had felt isolated and unsupported after hospital discharge. The specialist nurse recommended to Student C that she might find it useful to request attending the local Bowel Cancer Support Group as a student nurse volunteer. The specialist nurses are part of this support group. This group has meetings every 2 months but also has virtual meetings. Becoming active with this group enabled Student C to develop a very good understanding of how patients and their families cope with the disabling effects of having cancer, the treatment regimes, challenges of role changes, and how these individuals cope with living with cancer after surgery. The group also takes part in health promotion activities to raise awareness of bowel cancer. Student C was also able to evidence her contribution to developing awareness posters for local GP Practice waiting rooms. She linked these activities to the Domains in her OAR document and these were discussed as examples of WPE activity with her nurse mentor and personal tutor.