

Patient perspectives of enhanced recovery: the development of a patient passport and an evaluation of its impact on mothers' experiences

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INTRODUCTION: Mothers and their views should be at the centre of all enhanced recovery pathway (ERP) design processes and patient education about forthcoming hospital experience is key to success The obstetric population is young and information-seeking but surgical consultations are short and contain large amounts of critical information so both verbal and written information is pivotal.

METHODOLOGY: Mothers who had previously undergone section were extensively consulted during the development of an enhanced recovery companion guide for patients booked for elective caesarean section . This focus group had experienced mixed peri-operative outcomes and they provided crucial feedback on the content, communicative effectiveness, readability and comprehensibility of the leaflet. Other assessors included obstetricians, service users, midwives, pharmacists and our Trust patient information department. A cohort of mothers used the subsequently developed patient passport to guide them through their enhanced recovery and its impact was evaluated.

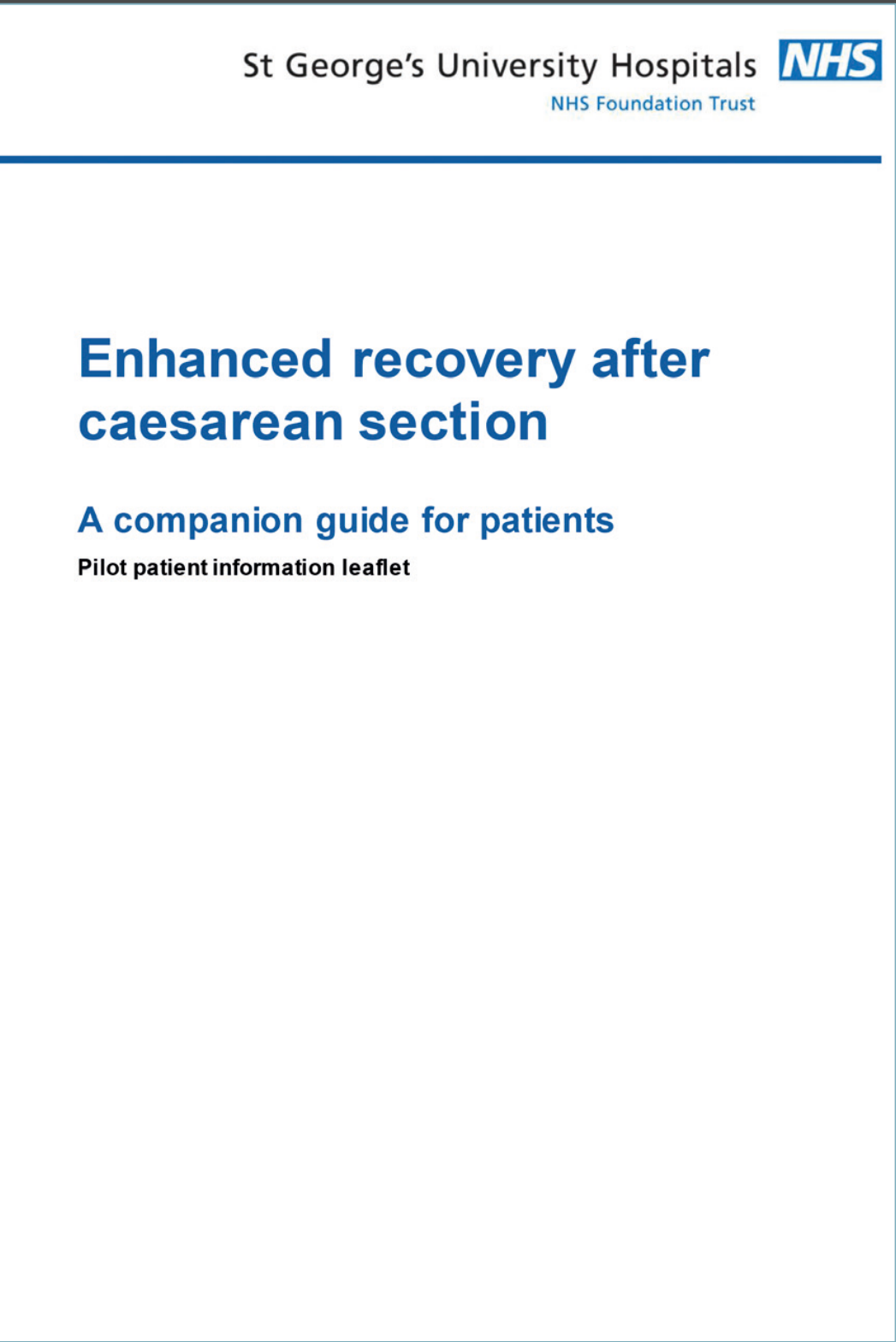
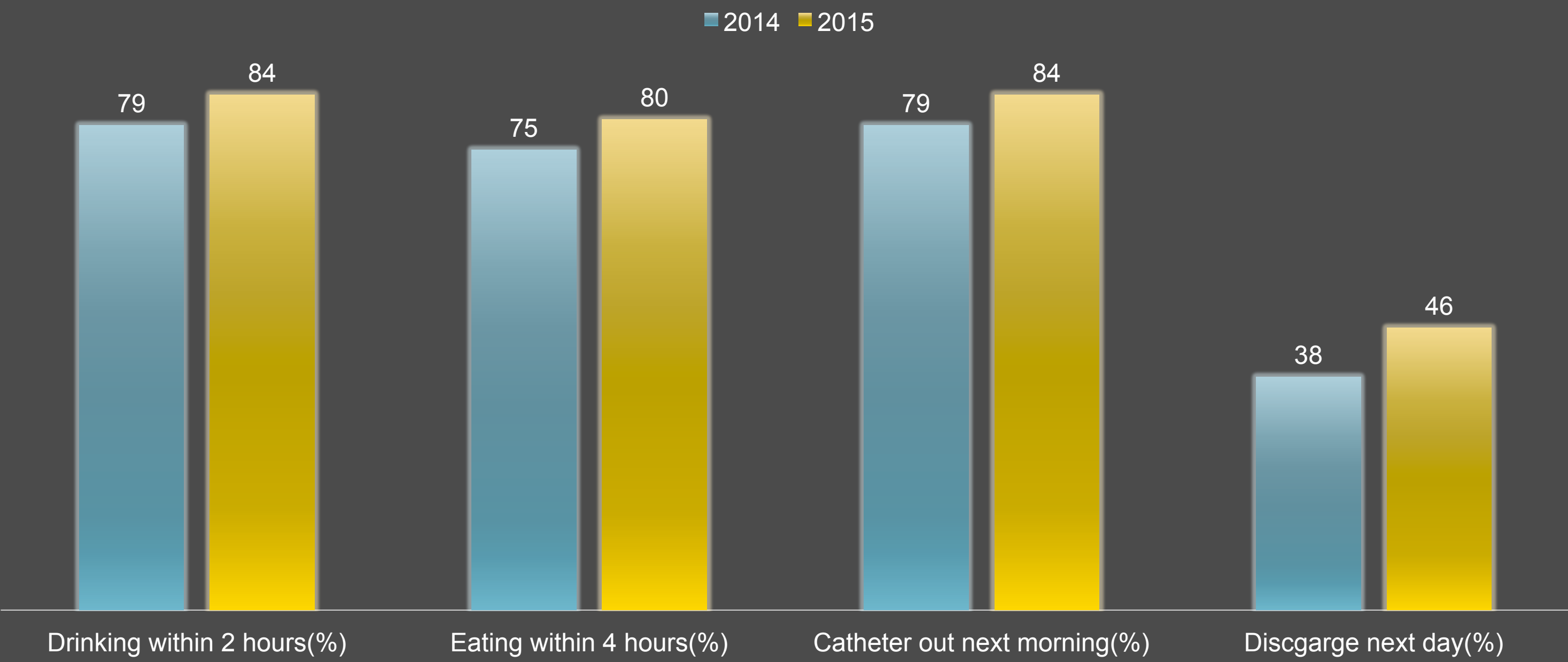


40 mothers undergoing elective cesarean sections in September 2015 received an ERP patient passport during their pre-assessment and used it throughout their hospital stay. Mothers were asked to complete a questionnaire for feedback.34 women responded (response rate of 85%)

RESULTS:

	Yes	No	Don't Know	Not answered
Did the leaflet help you achieve control over your recovery process	28 (82%)	2 (6%)	4 (12%)	0
Did it help improve your experience whilst in hospital?	27 (80%)	2(6%)	4 (12%)	1(3%)
Do you feel it was a useful document during your recovery	28 (82%)	2(6%)	3 (9%)	1(3%)

Do you think the information in the leaflet was	
Too much	1 (3%)
Not enough	0
Just right	33 (97%)



Discharge milestones	
	Yes
My pain is well controlled	<input type="checkbox"/>
I am able to pass urine (wee) without difficulty	<input type="checkbox"/>
I understand how to breastfeed my baby	<input type="checkbox"/>
My baby has been health checked	<input type="checkbox"/>
I can move around freely	<input type="checkbox"/>
I have had a shower and removed my wound dressing	<input type="checkbox"/>
I have watched the discharge information video	<input type="checkbox"/>
I have been seen by an anaesthetist	<input type="checkbox"/>
I have been given my blood thinning injections	<input type="checkbox"/>
My midwife has assessed that I am fit to go home	<input type="checkbox"/>
I am happy to go home	<input type="checkbox"/>
We expect that some women will be ready to go home after 24 hours, but we also know that everyone is different and that some women may need some more time before they are ready to go home. You will only go home when you feel ready to do so.	

DISCUSSION: Our leaflet received very favourable feedback and patients commented that they found the leaflet informative and clear and especially in terms of setting targets for their recovery . Based on their recommendations ERP prompts have been introduced on the anaesthetic chart and the ward handover boards. The leaflet has been endorsed by the SWLMN (South West London Maternity Network) Implementation Working Group and is being adopted in the hospitals of our region. Our questionnaire shows that patients are receptive to information when presented in a locally relevant manner and such practices can be shared among networks of hospitals with shared infrastructures.

Reference: Lucas. DN, Gough KL. Enhanced recovery in obstetrics- a new frontier? International Journal of Obstetric Anesthesia (2013) 22, 92–95
Arman Kahokehr, Tarik Sammour, Kamran Zargar-Shoshtari, Lisa Thompson, Andrew G. Hill. Implementation of ERAS and how to overcome the barriers. International Journal of Surgery 7 (2009) 16–19

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