



## Oxfordshire Fracture Prevention Service - patient and public involvement

As a service we want to ensure the improvements we make reflect what matters to the people who will use them.

**Our aim:** is for people with lived experience of using the Fracture Prevention service (patients and carers or those with other relevant experience) to be involved in quality improvement projects within the service.

### Feedback

Using patient feedback has been an established part of the service since 2014. We have conducted a bi-annual patient satisfaction postal survey since this time and have used the results of these to guide any future changes to the service.

We included questions to gauge what the patients want – for example – a simple yes/no question as to whether the patients would have preferred a telephone consultation. We also used the narrative/qualitative responses that the patients gave to identify any emerging themes that needed to be explored.

### Involvement

It became apparent that we needed a more bespoke 'patient advisory group' to explore ideas with and use patient experience to underpin potential changes. On the last patient satisfaction survey, we included a section for patients to volunteer their details to become our 'advisors'. Nursing practitioners also spoke to patients in clinic if they expressed a desire to give feedback.

From this we have developed a small set of patients to give feedback regarding quality improvement, we usually do this on an adhoc basis, there are no defined expectations of the patients. They have helped us with a range of work from letter wording to feedback from consultations. It has been challenging to get patients regularly involved or in a structured group, but they have been willing to give feedback on an adhoc telephone or email platform.

### Governance

Whilst aiming to ensure we have a high level of patient and public involvement we have tried to engage these advisors to attend our clinical governance meeting every 6-8 weeks. So far, we have only one patient who regularly joins us on the meeting - currently virtually. She has been a great asset to guide changes within the service and give the clinicians a perspective into what matters to the patient to guide changes – not what is easiest for the service.

**Next steps:** We continue to work towards a more formalised patient advisory group.