

OPTIMISE-IBD

Outcomes and Performance Targets to Improve Management and Integration of Services for Equity in UK IBD Care

Frequently Asked Questions

1) What are the benefits of participating in the pilot?

You will be part of a small group of IBD centres who will work collaboratively to learn and share how best to measure the KPIs and get support with improvements you wish to initiate. Using a quality improvement approach, you will be part of an 'Action Learning Set'. You will better understand your service and initiate targeted improvements for patient benefit.

Key contributors will be acknowledged in any resulting publications and a bannership author model will be used for everyone involved in the work.

2) What is the time commitment?

The project will run for 18 months. Each site needs to nominate a project lead who will be the main contact for the project team (this can be a nurse, trainee/fellow, consultant or manager). During the initial phase the time commitment might be around 1-2 hours per week. During the data collection phase, an additional 1-2 hours might be needed for a few weeks. At other times it might be around 2 hours per month. This project would be an ideal QI project for trainees to fulfil the requirements of higher speciality training, develop leadership and collaborative skills in a supported environment.

3) What actions are we expected to commit to?

Each site is expected to engage with the BSG project management team and participate regularly in Action Learning Sets, which will usually be online. We expect to run 1 or 2 face to face engagement events as part of the project.

Each site is also expected to upload the expected audit data for each KPI. This will differ between sites.

Everyone involved is also expected to share their learning and contribute to an open and supportive environment. The project is all about learning and improving.

4) Will there be direct funding for sites?

There is no direct funding available. However, for any face-to-face meetings, travel will be fully funded.

5) How are you planning to capture the audit data?

We are planning to use RedCAP for this project to collect anonymised data which will be held securely with appropriate data protection impact assessments (DPIA) and risk mitigation processes in place

6) What are the IG implications?

As with any such audit project, we will seek Caldicott Guardian approval for the lead centre. Each pilot site needs to get local approval for the audit before data collection can commence.

7) Are there any exclusion for sites to participate?

Sites have to be able to identify patients that are newly diagnosed with IBD and patients on advanced therapy. If this is not possible with the current data set-up, a site cannot participate.

Finally, sites have to confirm in their application that the leadership team are supporting the application.

If you have any other questions, please get in touch: IBDProjects@bsg.org.uk

We look forward to hearing from you!

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