The effects of cancer and its treatment can have major adverse effects on women suffering from cancer and the adverse effects of its treatment. Patients and their family members will be accompanied by cancer and will continue to have their quality of life affected by cancer and its treatment. Evidence shows increased risk of relationship breakdown when suffering from the adverse effects of cancer and its treatment.

Due to this being a new service outcome measures will be collected and will be used to demonstrate the effect the intervention has had on patients self-worth, confidence and state of mind.

Over the last 2 years St Luke's Hospice has invested in the use of Care opinions as a way of improving the way we use patient stories to appreciate our staff and improve services.

This has been a process of parallel continuous learning. We will also share what we have learnt about leading such a process and what our staff have learnt along the way.

This will be helpful for anyone in a leadership role wanting to follow a similar approach.

**150 HOW WE HALVED THE WAITING TIME FOR HOSPICE SERVICE THROUGH IMPLEMENTING QI METHODOLOGY**


As part of a wider QI programme St Luke's Hospice invested in a Partnership with NIHR Collaboration for Leadership in Applied Health Research and Care (CLAHRC) to assess the impact of applying Quality Improvement methodology to the Woodgrange Centre (WGC). The WGC is our Daycare and outpatient Centre.

The presentation will present the series of Quality improvement methodologies used and what we learnt from each step: These include:

- Initial engagement with patients, carers, staff, volunteers and referrers
- Touchpoint Mapping
- Using an action effect diagram to develop a shared aim and prioritise first steps
- Use of process mapping to engage staff in the change idea
- Introducing and supporting staff to try tests of change through PDSA cycles
- Learning to use measurement for improvement to demonstrate the improvements

We will show how this has changed the culture, enthused and developed our staff and amongst other improvements halved the average waiting time from referral to 1st visit from 20 to 11 days.

We will share the added quantitative data to patient feedback. We now know that as well as patients reporting that the ‘service is wonderful’, 43% believe the WGC has prevented a hospital admission.