

**Business case guide for the**

**SAGE & THYME® Foundation Level workshop**

20 Feb 2019

**Introduction**

This document is intended to provide guidance on the information potential customers may wish to include in a business case, to gain the necessary organisational approval and/or funding to run SAGE & THYME foundation level training in their organisation.

Some organisations have their own business case template that must be used. However, the information suggested below should assist the completion of such templates.

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| 1. **Building the case** |

1. **General evidence:**

Mention the evidence regarding the need for staff to have good communication skills:

* + Good communication influences patients’ emotional health, symptom resolution, function and physiological measures (blood pressure), and decreases reported pain and drug usage.[[1]](#footnote-1)
  + Insufficient training in communication is a major factor contributing to stress, lack of job satisfaction and emotional burnout in healthcare professionals.[[2]](#footnote-2),[[3]](#footnote-3)

1. **Relevance of SAGE & THYME training to healthcare staff and others:**

* **NURSES AND MIDWIVES:** the knowledge and skills taught apply to sections 2 and 3 of the Nursing and Midwifery Council publication, ‘**The Code**: Professional standards of practice and behaviour for nurses and midwives’ (2015). SAGE & THYME is also included in the **Royal Marsden Manual of Clinical Nursing Procedures** (2015).
* **DOCTORS:** the knowledge and skills taught apply to domain 3 of the ‘GMC: Good Medical Practice’ (2013).
* **HEALTH AND CARE PROFESSIONS:** the knowledge and skills taught apply to section 7 of the ‘Health and Care Professions Council: Standards of conduct, performance and ethics’ (2012).
* **MANAGERIAL and ADMINISTRATIVE staff:** the skills of listening and responding helpfully are the foundation of work in the NHS.
* **VOLUNTEERS and STUDENTS:** these people often have more time to spend with people who are upset and therefore need to know how to confidently structure conversations with them.

1. **Local and national strategies:**

Mention the local and national strategies and guidelines that require communication skills training (e.g. local needs assessments). This could include:

* The SAGE & THYME model addresses four of the ‘**6Cs’** key staff skills promoted by NHS England: care, compassion, competence, and communication.
* SAGE & THYME is used as a case study in Macmillan Cancer Support’s report on ‘**How we can support and empower NHS staff to deliver a good experience of care to patients**’

1. **Need for change:**

Explain the current situation in your organisation with regards to communication skills (e.g. you may have data on complaints relating to communication, recent incidents, or a CQC inspection may have highlighted some communication issues) and emphasise the need for change (see section 2 for more guidance).

1. **Evidence on the benefits of the SAGE & THYME Foundation Level workshop:**

From research in a hospital setting, participants show a significant increase from pre to post workshop in:

* perceived **confidence, competence and willingness to explore emotional concerns** of patients
* **knowledge**
* **self-efficacy and outcome expectancy** (needed to translate the skills taught into practice)
* **expert-rated** **participant behaviour** when speaking to a simulated patient.[[4]](#footnote-4),[[5]](#footnote-5)

**Motivation** to use the skills in practice, and the **perceived usefulness** of the SAGE & THYME model, are high after the workshop.5  95% of participants plan to change practice.4 100% participants would recommend the training to others4.

**After the training (2 weeks/2 months) - staff report:**

* + Structure helpful5,6
  + Increased confidence5,6
  + Gave control5
  + Feel satisfied about supporting patients5
  + Conversations more patient-focussed5
  + Left patients feeling satisfied and empowered5,6
  + Use SAGE & THYME structure with others (not just patients)5

In a different study with district nurses, knowledge and confidence in helpful communication behaviours improved and was **sustained two months after training**. Motivation to use the SAGE & THYME model was high and remained so at two months. Some nurses reported that the model saved them time.[[6]](#footnote-6)

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| 1. **Strategic fit** |

Explain how running SAGE & THYME training would fit with your organisation’s strategy. This may include: quality of care; patient experience; staff development and overall fit with the general mission statement of the organisation. For example:

* + **Communication:** to achieve an organisational, transformational change in the way staff speak to patients/carers and each other.
  + **Patient related outcome measures:** to reduce communication-related complaints about the services, to improve on measures of patient satisfaction related to communication.
  + **Staff related outcome measures:** to reduce grievances lodged by staff; to reduce sickness and absence; and to reduce communication-related problems highlighted in Healthcare Incident Reporting Service (HIRS) reports; to improve staff morale as measured in the staff survey.

Use current data from your organisation (and possibly others too for comparison) to demonstrate the issues – this could come from internal or external reports, Friends and Family Test, complaints data, CQC outcomes etc.

If possible, build in funding to evaluate the impact of the training on some/all of the above: this will help you to demonstrate value for money and patient/staff outcomes ready for the next funding request to continue with the SAGE & THYME training.

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| 1. **Training options** |

* **Other options:** mention other training programmes available in your area (e.g. from training companies, universities).
* **SAGE & THYME training**: introduce SAGE & THYME as a way of plugging the skills gap (more information can be gained from the ‘basic guide’ to SAGE & THYME – this can be downloaded from the right hand side of this page: <http://www.sageandthymetraining.org.uk/running-fl-workshops-your-organisation>).

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| 1. **Preferred option** |

Outline the reasons for choosing preferred option:

* 1. The SAGE & THYME Foundation Level training is based on evidence in the literature regarding how to deal with concerns and provide patient centred care and is nationally recognised for teaching foundation level communication skills.
  2. A paper has already been published on the use of the model (Connolly et al, 2010): analysis from 412 participants suggests that the workshops had a significant positive effect on self-confidence (p < .0005), self-perception of competence (p < .0005) and willingness to explore the emotional concerns of patients (p < .0005). 95% felt that the workshop would be very likely to have an impact on their practice. <http://www.pec-journal.com/article/S0738-3991(09)00248-1/abstract>
  3. More in-depth research has been undertaken to investigate the effects of the training on factors that influence communication skills in healthcare professionals and the paper was published in 2014. The findings show that the training significantly increases staff knowledge (both in a knowledge test and in a behaviour assessment from an expert in communication skills), their self-efficacy and outcome-expectancy: <http://onlinelibrary.wiley.com/doi/10.1002/chp.21214/abstract>
  4. The University of Manchester conducted some research on running the SAGE & THYME Foundation Level workshop for district nurses. The findings were that it: provided a structure for opening and closing conversations; led to a patient-centred approach; increased knowledge about communication behaviours, increased confidence in communication skills and left staff feeling motivated to use the model (these changes were sustained 2 months after the training). Some staff reported that using the model in their conversations saved them time. <http://www.ejoncologynursing.com/article/S1462-3889(15)00026-5/abstract>
  5. To our knowledge, the SAGE & THYME foundation level training is the only short (3h) course that can be taught to 30 people that has evidence that it improves communication skills in relation to dealing with concerns.
  6. The SAGE & THYME training has been picked up by a number of independent reports - see: <http://www.sageandthymetraining.org.uk/evidence-and-links>
  7. To date, around 70 organisations, including NHS Trusts (all but one of the Shelford Group NHS Trusts use SAGE & THYME), CCGs, hospices, universities, councils and charities have taken licences to run the training. Interest in the training continues to grow. See the map of current organisations running the workshop (you might wish to name drop local competitors or highly regarded organisations: <http://www.sageandthymetraining.org.uk/map-organisations-st-fl-licences> (click on ‘view SAGE & THYME in a larger map’ to list a list of the organisations.) You might also wish to use a quote from someone (see <http://www.sageandthymetraining.org.uk/testimonials>).
  8. It might also be helpful to refer to one or more of the **case studies** on how other organisations have adopted the training (see <http://www.sageandthymetraining.org.uk/case-studies> - the case studies can be downloaded from the right-hand side of the page). These case studies will also give you useful tips in preparing to adopt SAGE & THYME.

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| 1. **Details of proposed option** |

* **Trainees:** explain to who the training will be delivered (all/specific staff).
* **Facilitators:** explain who will deliver the training (you may intend to use internal and external facilitators) and how many facilitators you will need (three at the very minimum but ideally at least four to allow for staff sickness/annual leave). Explain whether you may increase the number of SAGE & THYME facilitators over time. Contact the SAGE & THYME team if you need more advice on how many facilitators you might need, depending on how many people you wish to train per year.
* **Number of workshops and staff trained:** explain how many SAGE & THYME Foundation Level workshops you plan to run per year and how many members of staff/volunteers/students you intend to train (you can teach up to 30 people per workshop).
* **Venue(s):** detail where training will be held (it is easier to teach in an open room without desks or tables).
* **Resources:** explain what resources will be required to deliver the training (a computer and a projector and screen for the PowerPoint presentation; flip chart paper and coloured pens for the small group work; a SAGE & THYME delegate pack for each person trained; facilities to show a DVD/film accessed via the internet; tea and coffee for delegates for the mid-session break).
* **Champion:** explain who supports the proposed introduction of SAGE & THYME training and any comments that they have had.

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| 1. **Details of the SAGE & THYME developer** |

* **Developer:** the SAGE & THYME training was developed by members of staff at Manchester University NHS Foundation Trust (formerly University Hospital of South Manchester NHS Foundation Trust (UHSM)) and a patient in 2006. Its aim is to teach the core skills of dealing with people in distress.
* **Developer details:**

Manchester University NHS Foundation Trust (MFT)

Wythenshawe Hospital

Southmoor Road

Wythenshawe

Manchester

M23 9LT

Tel: 0161 291 4210

E-mail: [sageandthyme@mft.nhs.uk](mailto:sageandthyme@mft.nhs.uk)

Web: [www.sageandthymetraining.org.uk](http://www.sageandthymetraining.org.uk)

* **Track record:** MFT has delivered the training to its staff since 2006 and has trained over 1300 SAGE & THYME facilitators. The SATFAC course (that trains people how to run the SAGE & THYME courses) was developed with the Maguire Communication Skills Unit at the Christie NHS Foundation Trust - experts in delivering communication skills training.

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| 1. **Legal and financial considerations** |

* **Legal:** explain that a licence is required from MFT in order to run the training. This is a legal agreement. There is limited scope to amend this agreement during negotiation so legal costs to your organisation should be minimal/none.
* **Financial:** explain the costs of setting up and running the training:
  + **Training costs for SAGE & THYME facilitators** (SAGE & THYME Foundation Level workshop followed by SATFAC course) - see current price list (<http://www.sageandthymetraining.org.uk/prices>) for fees charged for Manchester courses - training can be delivered locally and a quote can be provided on request.
  + **Annual licence fee** (refer to basic guide, see <http://www.sageandthymetraining.org.uk/our-licence-st-fl>) for guidance.
  + **Delegate packs** - order in boxes of 50 (see current price list) multiplied by the number of people you intend to train per year (30 per course) plus postage and packaging (based on boxes of 50 packs).
  + **Reflect & Refresh training** – recommended once the trained facilitators have run a few workshops, to improve and refine their skills- see current price list (<http://www.sageandthymetraining.org.uk/prices>) for fees charged for Manchester courses.
  + **Annual Study Day** – it is recommended that at least one facilitator attends this one-day event held in Manchester (normally in November and costs about £80 per person).
  + **Venue hire** (if necessary – this may be free).
  + **Catering** (mid-morning break drinks for 30 people + 3 trainers).
  + **Travel expenses** for facilitators (if necessary).
* **Income generation:** if you plan to offer the training to staff outside your organisation, explain that you can charge a small fee (currently a maximum of £60 per person) to cover the costs of running the training, but that you cannot make a profit.

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| 1. **Funding options** |

Suggest where funding will come from (e.g. Trust reserves, training budget, charity money (because SAGE & THYME is an enhancement, above and beyond, not just standard training, and benefits both patient and staff), Macmillan grant, Health Education England funding etc.) and mention how some costs can be covered by charging delegates (if appropriate - see above).

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| 1. **Timetable** |

Complete the following table with timescales and people carrying out actions:

| **Action** | **Time period** | **Action by** |
| --- | --- | --- |
| Identify at least 3-4 potential SAGE & THYME facilitators who meet the person specification and understand what is involved in being a facilitator |  |  |
| Identify source of funding |  |  |
| Book facilitators on SAGE & THYME Foundation Level workshop and SATFAC course |  |  |
| Apply for licence (by completing licence application form) |  |  |
| Facilitators received training (they need to pass the SATFAC course) |  |  |
| Licence agreement agreed and signed |  |  |
| Book venues for training courses (to start as soon as possible after SATFAC courses completed) |  |  |
| Order delegate packs |  |  |
| Commence training |  |  |
| Review training two months before licence needs to be renewed |  |  |

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| 1. **Management arrangements** |

* **SAGE & THYME mentor:** provide details who will be the main person responsible for implementing the training and support the SAGE & THYME facilitators.
* **Senior manager support:** mention a high-level person in your organisation who fully backs the introduction of the training programme and will act as an advocate within the organisation.

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| 1. **Other resource implications** |

* **Administration:** you may need an administrator to assist you in: booking venues; ordering catering; advertising training; booking people on to workshops; ordering delegate packs; invoicing external trainees (if any); collating evaluation forms.
* **Printing:** you may need a small budget for printing posters/leaflets advertising the workshops and for printing the certificates of attendance.
* **Staff replacement costs** (if appropriate)**:** you will need the line mangers to allow their staff to be released for 4.5 hours to attend the training (allowing one hour before the workshop to set up and half an hour at the end to debrief with the other facilitators). In some areas, this may require staff back-fill.

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| 1. **Risk assessment** |

Use the following as a starting point:

| **Nature of risk** | **Likelihood of risk** | **Impact of risk** | **Actions required** | **Actions carried out by** |
| --- | --- | --- | --- | --- |
| Staff attending SATFAC course do not pass it | Low | High – if too many people fail, there may not be enough facilitators available to run the workshops. | Ensure that staff put forward to become facilitators meet the person spec, understand what running a S&T workshop entails, and are aware of the demands of the SATFAC course. Aim to train up more than 3 facilitators. |  |
| Authorised facilitators may not run the SAGE & THYME training as they have been taught (which would breach the licence terms) | Low | Medium - could impact on effectiveness of the training; could result in MFT terminating the licence agreement; in rare circumstances could lead to a delegate being emotionally disturbed | Ensure that facilitators understand the important of not deviating from the training received |  |
| External delegates may not pay their fees | Low - most will be NHS organisations | Medium - could make a loss if it runs training courses and is then not paid for them | Include terms in workshop booking form regarding payment |  |
| Uptake of training courses may be lower than expected | Low | Medium - may result in courses being cancelled due to lack of uptake | Secure senior management support or training and communicate this well with all staff |  |
| SAGE & THYME facilitators who deliver the training could leave | Low | High - this may impact on delivering training depending on the number of SAGE & THYME facilitators available | Train at least 4 people to deliver SAGE & THYME training |  |
| A complaint may be raised by someone who received the training and was unable to deal with a distressed patient | Low | Medium - they would need to prove that the problem they experienced was due to the training | Make delegates aware of the limitations of the training |  |

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| 1. **Key benefits and outcomes** |

If your organisation took a licence to run the SAGE & THYME Foundation Level workshop it would be able to:

* 1. Deliver evidence-based communication skills training to all its staff
  2. Train up to 30 people per workshop
  3. Ensure that the concerns of patients and their carers, colleagues and others are addressed
  4. Give staff, students and volunteers a structured and quick approach for dealing with the concerns of patients/carers/others
  5. Improve customer care
  6. Meet [*relevant local/national*] guidelines

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| 1. **Conclusion** |

* Summarise the main points of relevance to your organisation.
* Consider working out the cost of providing the training per person trained (based on the numbers you have used above).

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| 1. **Help answering business case questions** |

If you need help answering any questions on your organisation’s business case template, or would like it reviewed before submission, please contact the business lead for SAGE & THYME: [joanne.thomas@trustech.nhs.uk](mailto:joanne.thomas@trustech.nhs.uk) or telephone 0161 276 6965 for assistance.

1. **Stewart MA (1996)**. Effective physician-patient communication and health outcomes: a review. Canadian Medical Association Journal; 152: 1423-33. [↑](#footnote-ref-1)
2. **Fallowfield L, Jenkins V (1999)**. **Effective Communication Skills are the key to good cancer care.** European Journal of Cancer; 35 (11): 1592-1597. [↑](#footnote-ref-2)
3. **Taylor C, Graham J, Potts H, Richards M, Ramirez A** **(2005).** **Changes in mental health of UK hospital consultants since the mid-1990s.** Lancet; 366 (9487): 742-444. [↑](#footnote-ref-3)
4. **Connolly M , Perryman J, McKenna Y, Orford J, Thomson L, Shuttleworth J, Cocksedge S (2010)**. **SAGE & THYME: A model for training health and social care professionals in patient-focussed support.** Patient Education and Counseling; 79: 87-93. [↑](#footnote-ref-4)
5. **Connolly M, Thomas JM, Orford J, Schofield N, Whiteside S, Morris J, Heaven C (2014).**  The impact of the SAGE & THYME foundation level workshop on factors influencing communication skills in health care professionals. Journal of Continuing Education in the Health Professions; 34 (1): 37-46. [↑](#footnote-ref-5)
6. **Griffiths J, Wilson C, Ewing G, Connolly M, Grande G (2015)**.  Improving communication with palliative care cancer patients at home - a pilot study of SAGE & THYME communications skills model. Eur J Oncol Nurs: DOI: <http://dx.doi.org/10.1016/j.ejon.2015.02.005> [↑](#footnote-ref-6)