

@ASPHFT @SurfingEm

What Matters to you: A patient, family and staff focused model of care

By Dr Emma Wilkinson- Consultant Physician



What I can do as a doctor.....

Is not the same as what I should do

- Living well to the very end; PFCC programme
- Homeward Bound and other projects
- Joy in work
- Elevator pitch



Aim

- All patients and families say about staff:-
 - You listen, you care, you know me
 - We understand each other and I trust you
 - I feel at ease
- All staff say:-
 - I listen, I care, I know you and we act together all for you
- Our trust :-
 - Support our staff to care and communicate
 - Ensures all staff have time to care



Methodology:

- Shadowing
- Ideal experience





Shadowing Topics:

- Clutter (nebs, urine bottles)
- Noise (bleeps, bins, snoring, shouting, handover)
- Lack of confidentiality (handover, curtains)
- Lack of stimulation/interaction
- Patient/ relative information and communication
- Food and drink to patients inappropriate



How do you know what good care looks like?

You know when it went wrong? Complaints

What is the main problem?







Hierarchy



How would you fix it? How would you measure it?











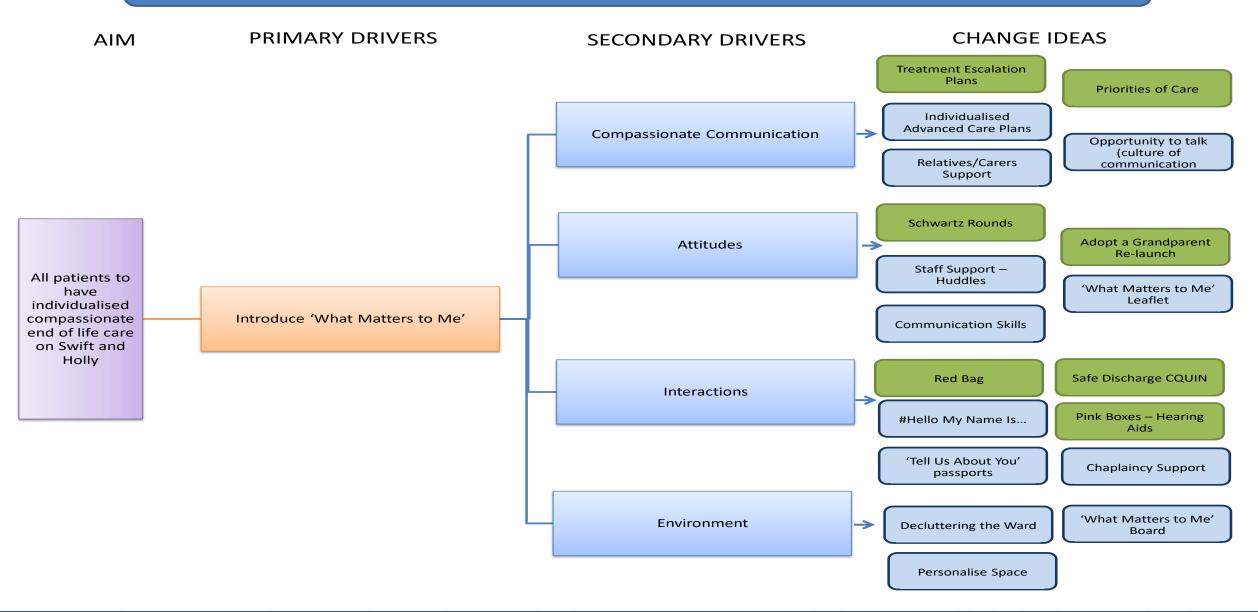


What Matters to you?

- **Origins**
- Our interpretation
- **Ethos**
- Measurements
- MDT working
- Handover
- 24 hour Communication with relatives
- Last 1000 days

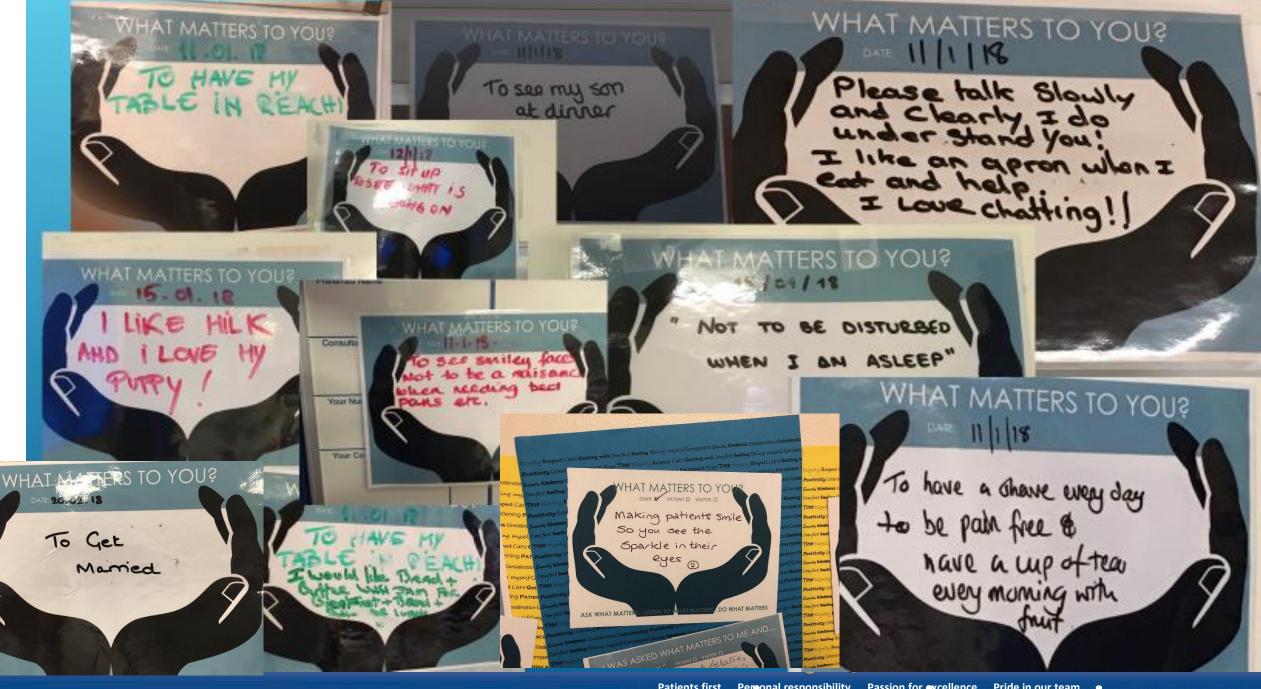


PFCC - Living Well to the Very End









Changes afoot in the Care of the Elderly Team

The Care of the Elderly Team have been working on a number of co-design projects with their patients, staff, relatives/carers and stakeholders, over the last few months to improve the department - we will be featuring these projects in Aspire over the coming weeks.





Above: Asma Bawd and Dr Emma Wilkinson

One is a project called 'Living Well to the Very End'. The team became part of this high-profile end of life care service improvement programme, in partnership with The Point of Care Foundation back in May 2017. The programme has helped to make tangible improvements to the service and through this project, the team aim to ensure that patients have individualised compassionate end of life care on Swift and Holly Wards.

This journey has lead the ward teams to the 'What Matters to You?' concept which will enable the wards to make further improvements and changes to the ethos on the wards. 'What Matters to you?' aims to encourage and support more meaningful conversations between staff and patients, focusing on the issues that matter most to people whilst in hospital. This project is particularly focusing in on staff, as happy staff leads to better care. Learning to respect each other in a Multi-Disciplinary Team is important in our wards.

Out of this have come some amazing ideas including; 'What matters to me' signs above the beds of each patient that are changed daily focussing on the personal things that matter most. Ward staff are designing artwork to line the corridor of the wards depicting how important personalised care is to the team. Also our Chief Nurse, Sue Tranka and Divisional Chief Nurse for Medicine, Louise Fox will be drawing names of staff that have demonstrated individualised personalised care on our wards over the last few weeks later today (15th January) for a prize.

Dr Emma Wilkinson

'What Matters to Me' Prize Draw



On Monday the 15th January our Chief Nurse, Sue Tranka and Divisional Chief Nurse for Medicine, Louise Fox visited Swift and Holly wards to award prizes to staff that have demonstrated individualised personalised care over the last few weeks through the 'What Matters to Me' project.

Emma Wilkinson, Consultant Geriatrician said, "I would like to say a huge thank you to all the staff on Holly and Swift who have supported this individual personalised compassionate care project, despite significant pressures. Congratulations to the Winners. They were well deserved, although they all are, and I wish we had more prizes!

"They are: 3rd place - Mo Rahaman from Swift, 2nd place Kristina Walsh from Holly and 1st prize to Angel Baloyo also from Holly.

"Staff believe this project is important, it ties in with our Trusts Values and is novel way to approach a project by developing an ethos that is important to everyone; Staff, Patients and Relatives. The project has been built around shared learning and understanding from all these people. It has also been great for the team, building a strong unit where we understand, communicate, support and learn from each other's strengths.

"I also wanted to say a huge thank you to the palliative care team that have helped hugely in this. They have been fundamental in its design and supported it by developing communication guides and workshops. Huge thanks also to the excellent PMO team for their support as always.

https://bethechan geasph.com/2018 /02/19/living-wellto-the-very-end/



MATTERS Communication Skills

"I hear, I forget, I see, I remember, I do and I understand"

		Why do we want to do it?	OK how do we do it?	What do we do next?
М	Meet and Greet	First impressions count 10/ 5 Rule	10 feet – eye contact and head nod 'Good morning'	Holly swift embed 10/5 rule
A	Acknowledge	10/ 5 Rule #yournameis – preferred name	 5 feet (on the ward / by the patient) Acknowledge everyone in the room (patient and families). Eye contact, smile Offer handshake, Use nonverbal skills (Positive nod of the head, Positive/interested/encouraging facial expression, Positive gestures, Respect the personal space of the patient, Remove physical obstacles) 'Good morning Mr Tim Smith, what would you like me call you today?' 	Swift and Holly to embed: • #yournameis • Utilise white boards at beds to be completed
т	Talk and introduce ourselves	Communication skills to promote individualised care	Start the conversation What your name is, who you are, something about your role/yourself 'My name is Clare, I'm a doctor and I've worked in the hospital for 3 years'	Swift and Holly to embed #mynameis Utilise white boards at beds to be completed

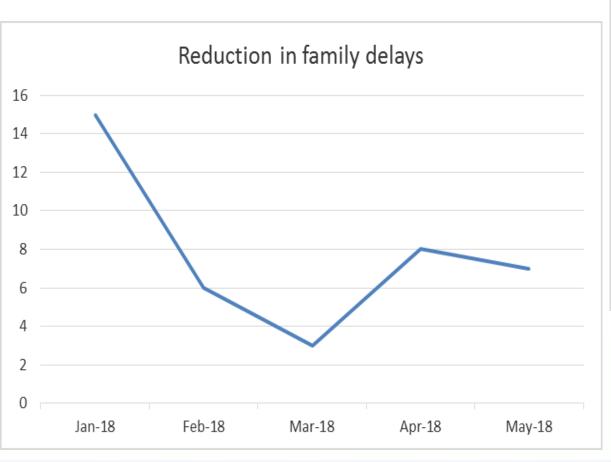
Т	Time to Listen understand and hear Talk / speak Read Write to the patient and each other	Opportunity to talk culture Communication skills to enable individualised care	Use non-verbal skills Active listening (Positive nod of the head, Positive/interested/encouraging facial expression, Positive gestures, Respect the personal space of the patient, Remove physical obstacles) Give time to identify/communicate next steps. When this is not possible, give a time in which you will update patient on progress. Acknowledge your communication skills	Swift and Holly to adopt tool to support 'What matters to you?' conversation
E	Explore what matters	'What matters to you?' conversation happens reliably for every person, every time.	"What are the things that are important to you at the moment?" "What are some of the things you would you like to achieve as a result of this support?" "When you have a good day, what are the things that make it good?"	'What matters to you?' conversation is carried out on Swift and Holly and is communicated across the ward. What matters to you conversation standards Your preferred name (whiteboard updated) The people that are important to you (PAS updated whiteboard updated) The everyday / every person/ every time question What matters to you today- (handover-colleague sharing – promote what matters to you culture)

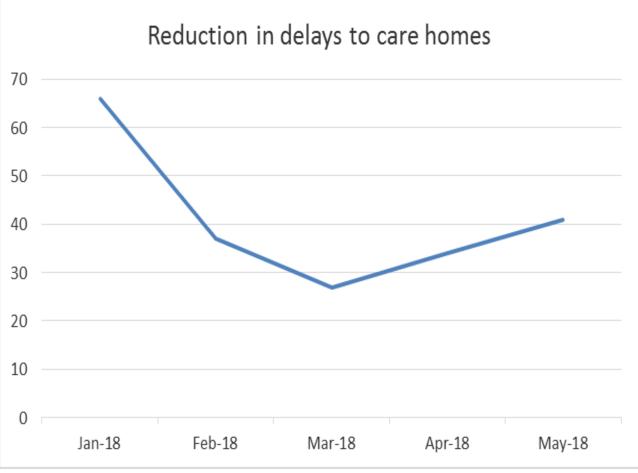
R	Respect	Compassionate care Shared decision making Patient centred care Listening not telling Giving available options Demonstrate understanding of wishes	Writing care plan Sharing with team Action on what you can do, communicate and escalate what you can't "you would like your wife to help you with your lunchand you don't like chocolate fortisips" Now tell your colleagues	What matters to you conversation standards • Your preferred name (whiteboard updated) • Food (whiteboard updated) • People that are important to you (PAS updated whiteboard updated) The everyday question What matters to you today (handover- colleague sharing — promote what matters to you culture)
S	Summarise and share	Summarising and gaining feedback / evaluation Action and communicate wishes with team	"thank you for sharing that with meThank you for waiting do you have any other questions?" communicate with colleagues	 Handover process- what matters to you information sharing Board round - what matters to you information sharing What matters to you - title in Nursing notes Hand over sheet Housekeeping board Priorities for Care - Adapt communication sheet 'What are we going to do today' 'What matters to you'

Measurements:

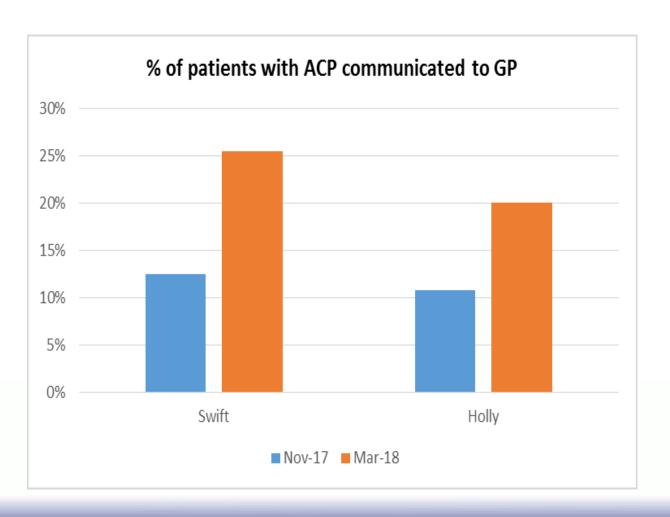
- Priorities documents
- Advance care planning documentation
- DNAR discussed with family
- Preferred name recorded/ "what matters to you" boards
- Staff survey
- Red to green delays

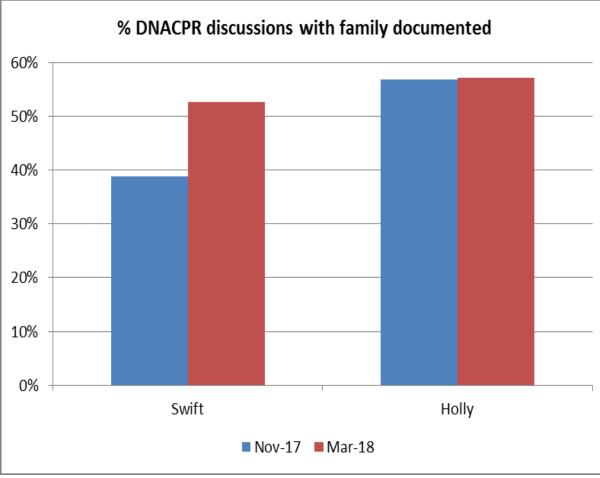














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