

Change happens one person at a time



International Forum on Quality and Patient Safety
2024



Objectives

- Understand the power of a personalised approach to change: we should not assume that one size fits everyone
- Show how behavioural science concepts can be applied to a wide variety of challenges within the healthcare setting
- Use the knowledge from this session to design interventions that inspire change
- Feel equipped to incorporate meaningful co-design into future improvement initiatives




Think 10 seconds





**what
matters
to you?**

Vital Signs																																		
1st	Body Temperature																																	
2nd	Pulse																																	
3rd	Respiratory Rate																																	
4th	Blood Pressure																																	
5th	 <p>The diagram illustrates a pain scale from 0 to 10. It features six circular faces with different expressions and colors: 0 (green, smiling), 1 (light green, neutral), 2 (yellow, neutral), 3 (yellow, neutral), 4 (orange, neutral), 5 (orange, neutral), 6 (orange, frowning), 7 (red, frowning), 8 (red, frowning), 9 (red, frowning), and 10 (red, crying). Below the faces is a horizontal scale with tick marks for each integer from 0 to 10. Labels are placed above and below the scale to describe the pain levels.</p> <table border="1"><thead><tr><th>0</th><th>1</th><th>2</th><th>3</th><th>4</th><th>5</th><th>6</th><th>7</th><th>8</th><th>9</th><th>10</th></tr></thead><tbody><tr><td>No pain</td><td colspan="2">Discomforting</td><td colspan="2">Distressing</td><td colspan="2">Intense</td><td colspan="2">Utterly horrible</td><td colspan="2">Unimaginable unspeakable</td></tr><tr><td colspan="2">Very mild</td><td colspan="2">Tolerable</td><td colspan="2">Very distressing</td><td colspan="2">Very intense</td><td colspan="2">Excruciating unbearable</td><td></td></tr></tbody></table>	0	1	2	3	4	5	6	7	8	9	10	No pain	Discomforting		Distressing		Intense		Utterly horrible		Unimaginable unspeakable		Very mild		Tolerable		Very distressing		Very intense		Excruciating unbearable		
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What Matters To You?

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Who's who?



Think 10 seconds





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The Patient Experience

What Matters To You – Compassion Rounds

Creates safe, smooth, and compassionate transitions to home

Reduces readmissions due to lack of care, medication issues, & social needs

STORY OF FAITH, HOPE AND SURVIVAL

How a routine knee replacement became a turbulent journey through emotional, spiritual and physical health



Jarle, a story about change

From two helpers in all daily activity to his own flat, making his own coffee

- Look who came by for coffee
- Putting «What matters to you-conversations» in to the whole system
- Using «What matters to you-form»(PSFS), its about:
 - Ask what matters to you
 - Listen and create goals together with patients
 - Create actions that the patient believes can improve health, level of functioning and coping
 - Ask again to find if you have improved
- Build change through QI and learning from the best examples



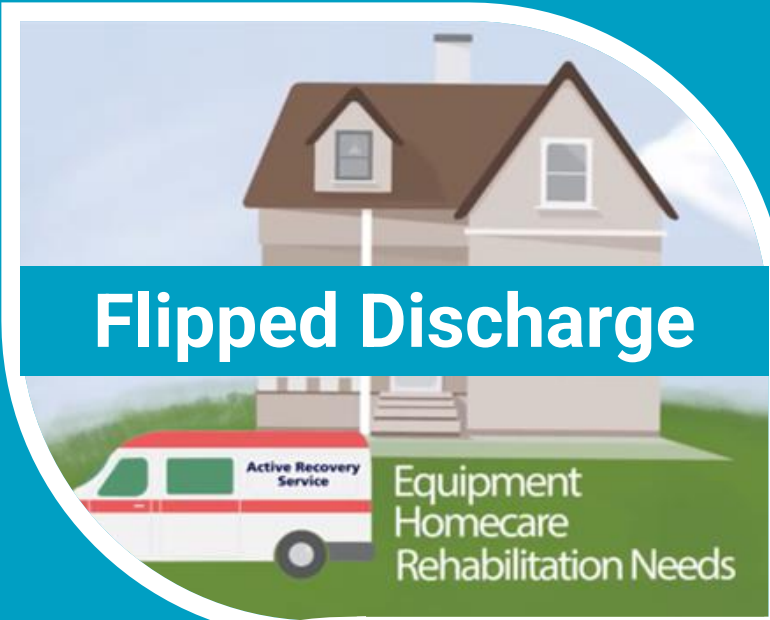
What If We Gave Patients the Skills and Knowledge to Care for Themselves?

- Self-care program for patients recovering from surgery, involving them in their own care
- Over four years:
 - 28,000 fewer bed days
 - \$40 million in savings
 - 47% reduction in 30-day readmission rates



Clarence Blackmon





Flipped Discharge

Equipment
Homecare
Rehabilitation Needs



Buurtzorg



Backpack Nurse



CAPABLE



Hospital at Home



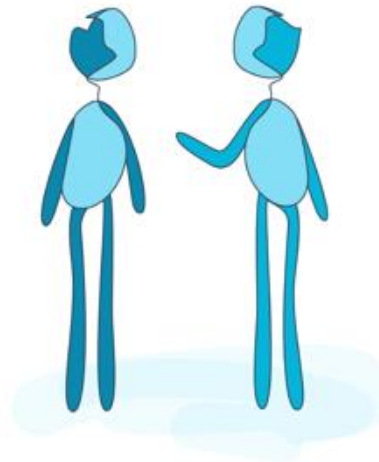
What Can You Do?

- Ask “What matters to you?”
- Take a patient home, as Anders does
- Start Rosie’s Compassion Rounds
- Follow up to see how the person is doing at home, and ask:
 - “What are you having for dinner tonight”
 - “Do you have meds for the week?”



What Matters to You (WMTY): Creating change within our healthcare system one conversation at a time

What Matters To You?



Ask *What Matters.*
Listen *to What Matters.*
Do *What Matters.*

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Take out?

What Matters to Us



Hi, I'm Claire Snyman.

- Family, friends and being out in nature!
 - Patient & healthcare collaboration and embedding an understanding of what matters most to people across healthcare



Hi, I'm Karen Turner.

- Important people in my life are my two teenage girls, my family and my pet rabbit.
- Supporting teams to improve their staff and patient experience by asking, listening and doing what matters.



Hi I'm Helen Lee

- My 3 boys, family, friends & my 2 dogs!
- Passionate about people receiving high quality health care and improving care with people with lived experience

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Why is creating a culture around WMTY important?

See individuals
as people

Direct impact on
patient care and
quality of life

Key driver of
people-centred
care

Gives agency

Sustainable
culture change

Follows patients
across their
dynamic journey

*Ask What Matters.
Listen to What Matters.
Do What Matters.*

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How do you build WMTY into the culture of an organisation?

One conversation at a time

Try it yourself

Start with colleagues

Weave it into systems and structures

Top tips and pit falls

- Find champions
- Exec sponsor
- Takes time but keep focused
- Don't get disheartened
- Collect stories that show impact
- Avoid a tick box at all costs - needs to be meaningful
- Join up with others who are doing the work

*Ask What Matters.
Listen to What Matters.
Do What Matters.*

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What matters to you? #WMTY24

Ask *What Matters.*
Listen *to What Matters.*
Do *What Matters.*

6th June 2024 WMTY International Day [What Matters To You? - \(wmtty.world\)](https://www.wmtty.world)

[*Introduction to WMTY*](#): Jason Leitch TED talk [10mins]

<https://www.goshadow.org/wmtty>

<https://healthqualitybc.ca/patient-community-voices/what-matters-to-you/>



WMTY World community

What Matters To You ?

WHAT MATTERS TO YOU?

COUNTRIES

RESOURCES

WMTY SCIENTIFIC POSTERS

NEO

CONTACT

What Matters To You?



What Matters To You?



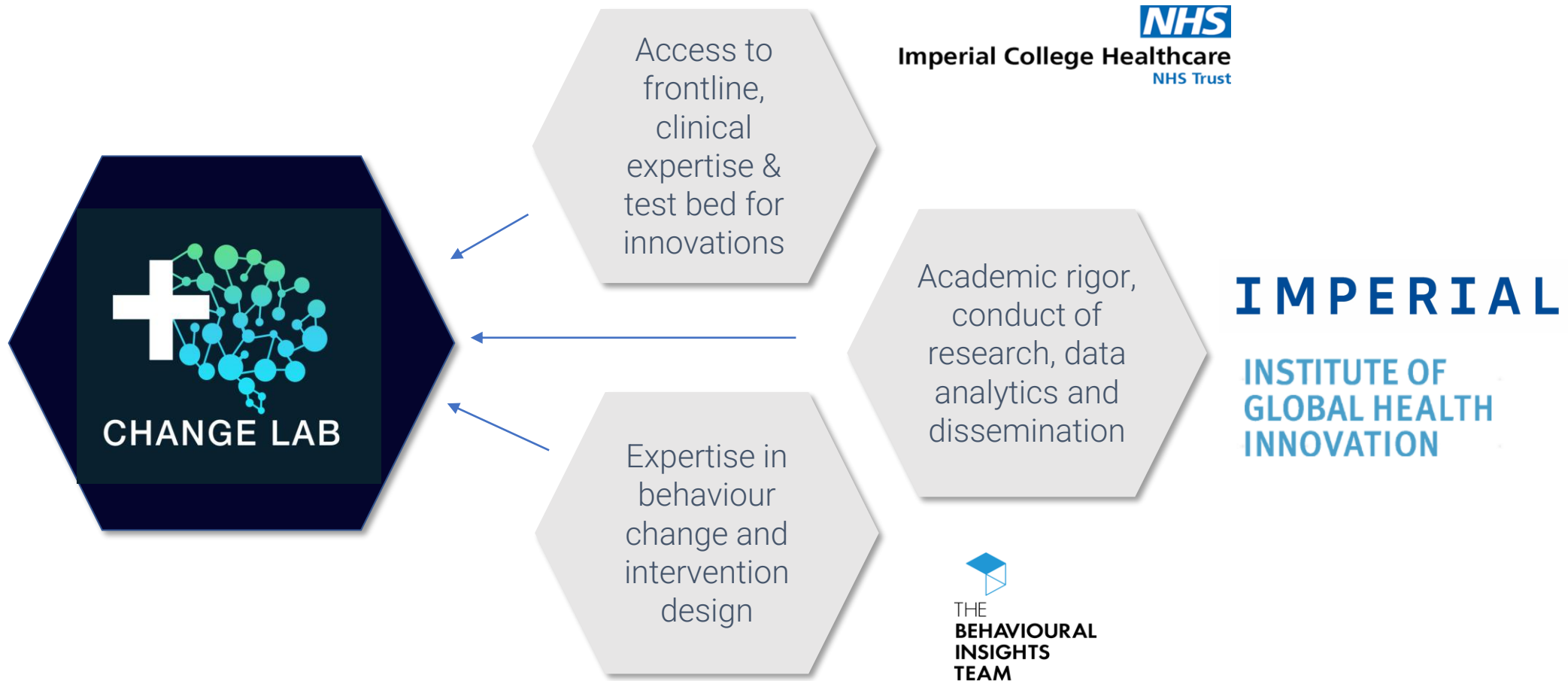
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THE CHANGE LAB

Applying behaviour insights to solve healthcare challenges

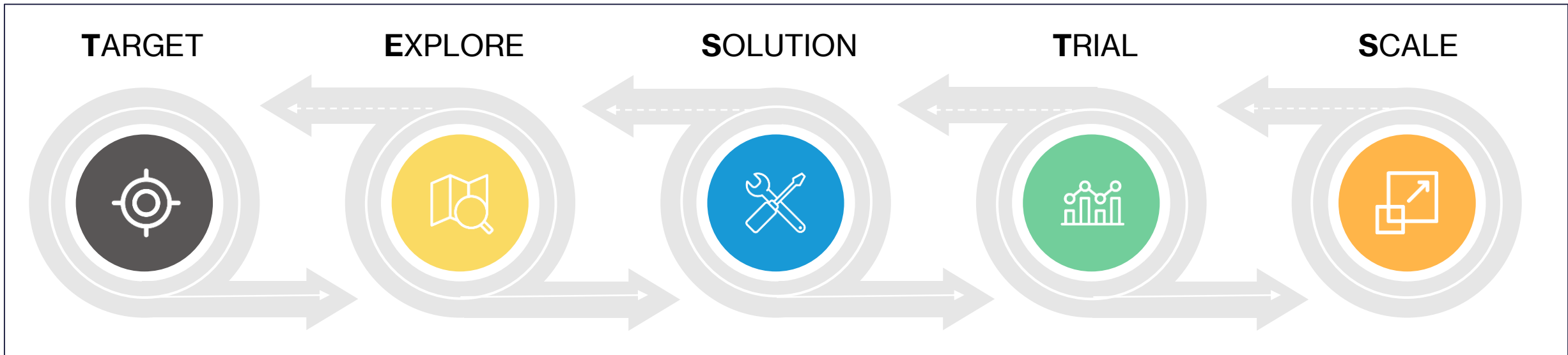
What is the Change Lab?



Embedding behavioural science into quality improvement work

- Individuals don't always make the healthiest / safest choice - **even if they intend to do so**
- Behavioural Science can help to make these choices **easier and preferable** for individuals
- **Understanding the determinants of a behaviour** lead to more effective intervention design and implementation

Our methods



The importance of co-design

- Problem setting
- Deciding on the target behaviour
- Understanding the barriers
- Engagement with the process
- Bring together a range of expertise
- Invested in the outcomes
- Pathway to scale



PROJECT EXAMPLES



Providing feedback to nurses to improve use of Barcode Medication Scanning Software

- Target Behaviour: Scanning medications during ward rounds
- Explore: Qualitative Interviews with nursing staff and patients
- Solution: Feedback intervention
- Trial: Implemented on five wards, rest of hospital acting as a control
- Scale: Ongoing





“Last week, the medication scanning rate on our ward was XX%. This is an increase from XX% the week before. Well done!

The **top two** scanners on *insert ward name here* last week were and, who both scanned more than 100% of their medications. Don't forget there are a few ways you can score over 100%, including by scanning patients' own medications.

Insert number nurses improved their scanning rates over the last week. The two nurses who improved their scan rate by the most were and ... ! Well done!

This week everyone should focus on ensuring all oral medications are scanned.”

PPID MEDICATION SCANNING RATES FOR XXX

Monday 14th November to Sunday 20th November

Last week xxx scanned 34.8% of medications.

During the last four months you have improved your scan rates so much – you are now often over 50 or 60%, so well done!

The top two scanners last week were

.....
.....

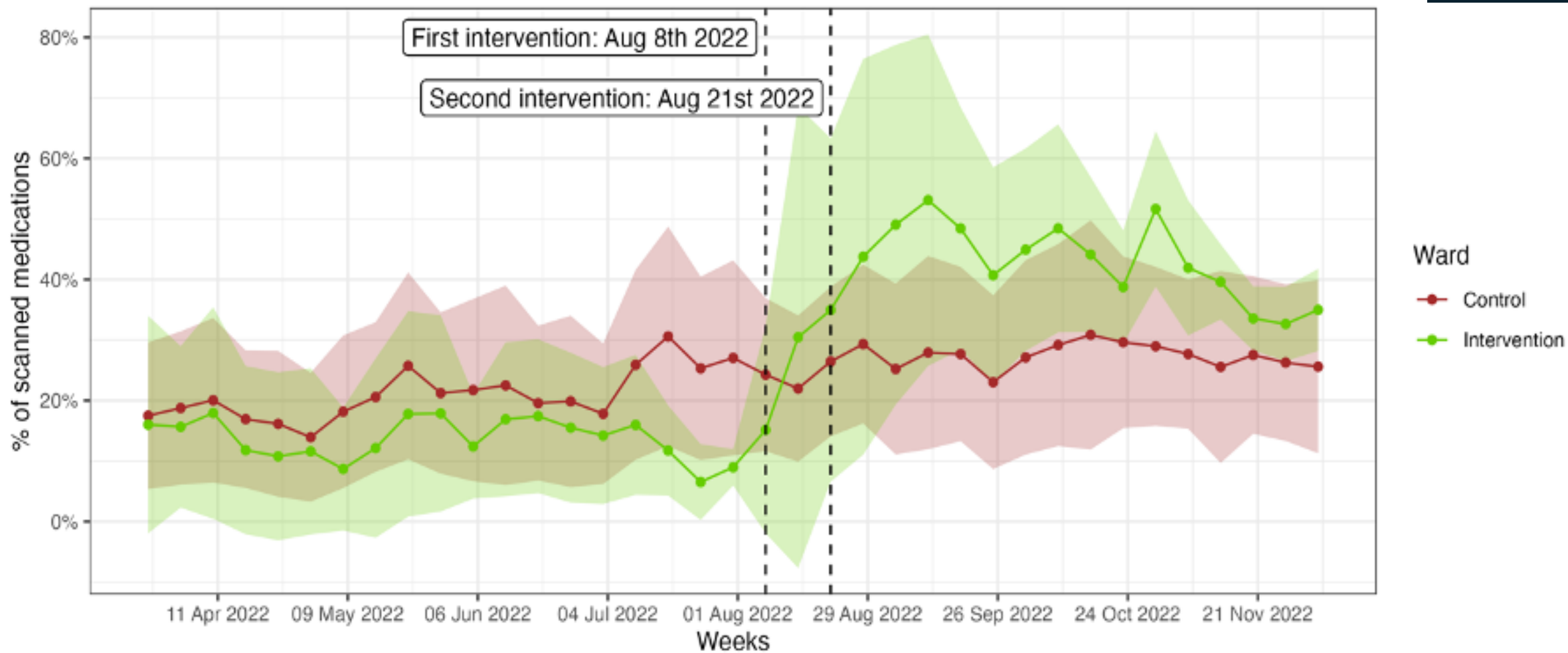
The two most improved scanners last week were

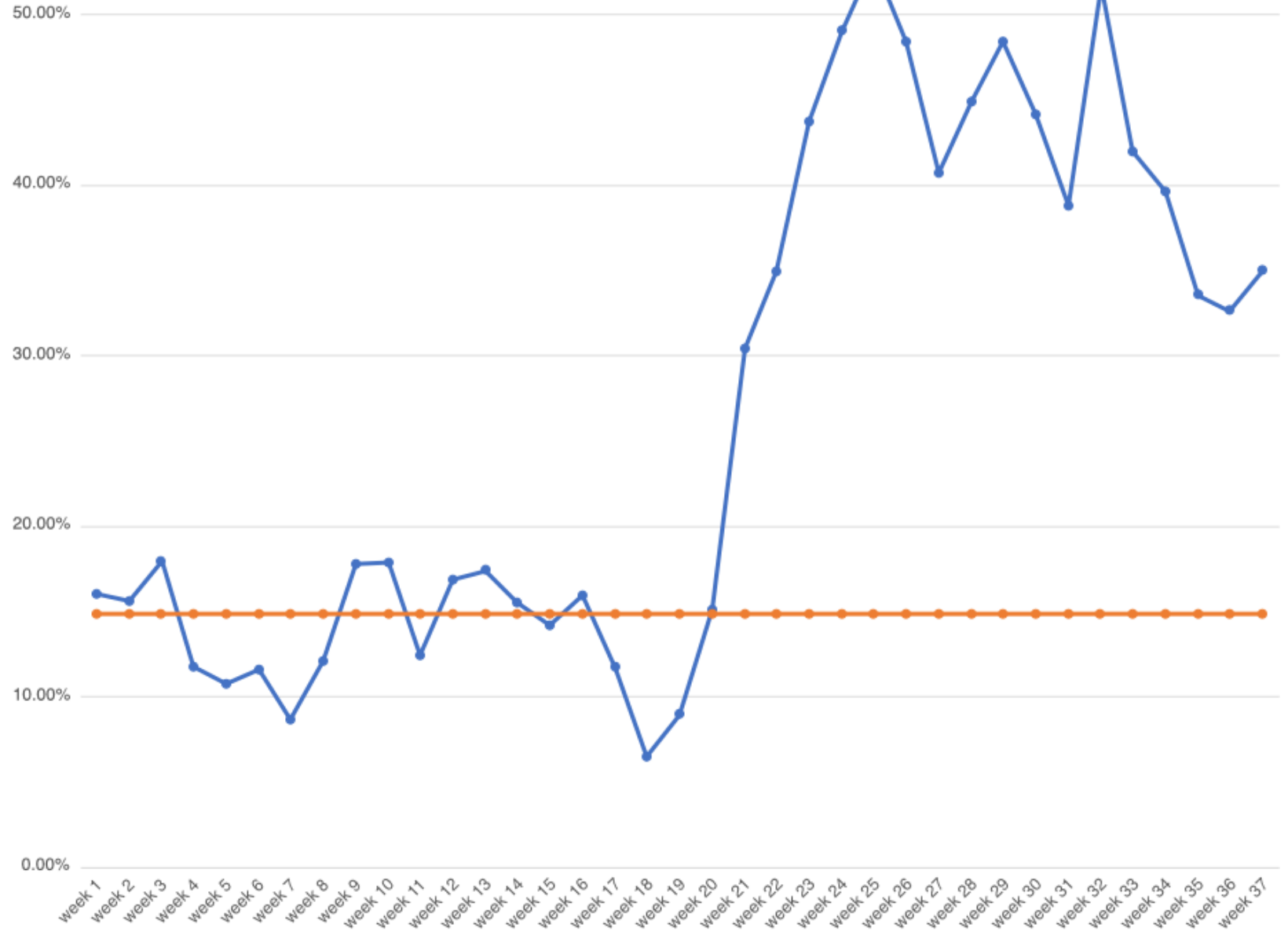
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Now let's get to a consistent scan rate of above 50%!



Even one person not scanning will bring down the ward's rate – so let's work together as a team to improve patient safety! We know you can do it!





Improving hand hygiene compliance

- Target Behaviour: Compliance with WHO Moments 1 and 5 for hand hygiene
- Explore: Observation on three target wards
- Solution: Visual prompts at key locations
- Trial: Implemented on three wards, observation of effect
- Scale: Rolled out across Imperial College Healthcare NHS Trust

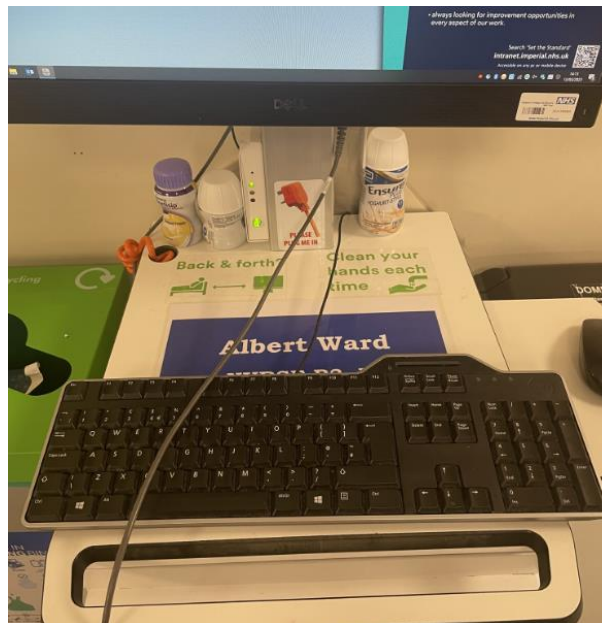


Improving hand hygiene

Back & forth?



Clean your hands each time



Before you care for me...



Clean your hands please!

Improving hand hygiene compliance



Under the sea, is where gloves will be...



..so if you can, clean your hands instead



Reducing inequity in outpatient attendance

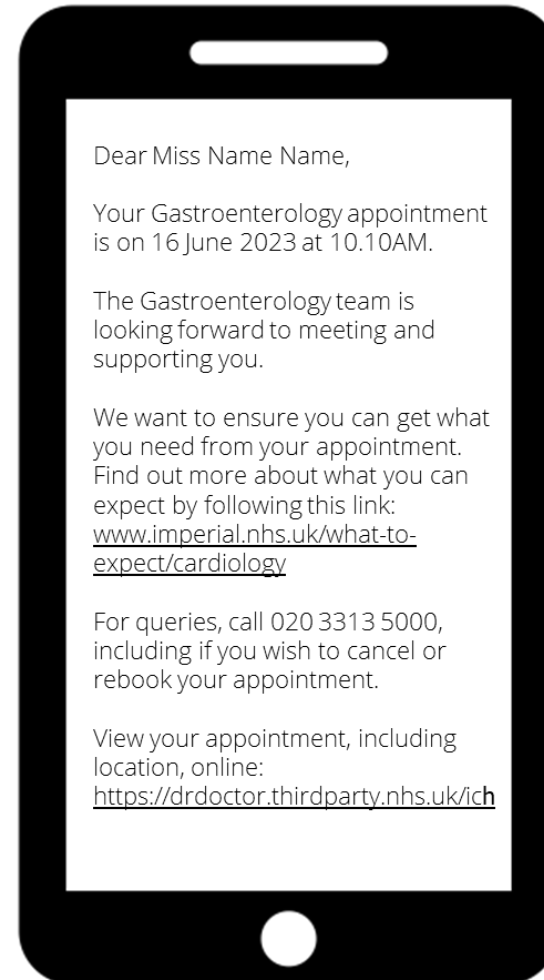
- Target Behaviour: Reducing DNA's in groups most affected by inequity
- Explore: Qualitative interviews with patients and NHS staff
- Solution: Co-design of text message interventions, informed by barriers
- Trial: Randomised controlled trial in 5 outpatient departments
- Scale: Recommendations to Imperial College NHS Healthcare Trust



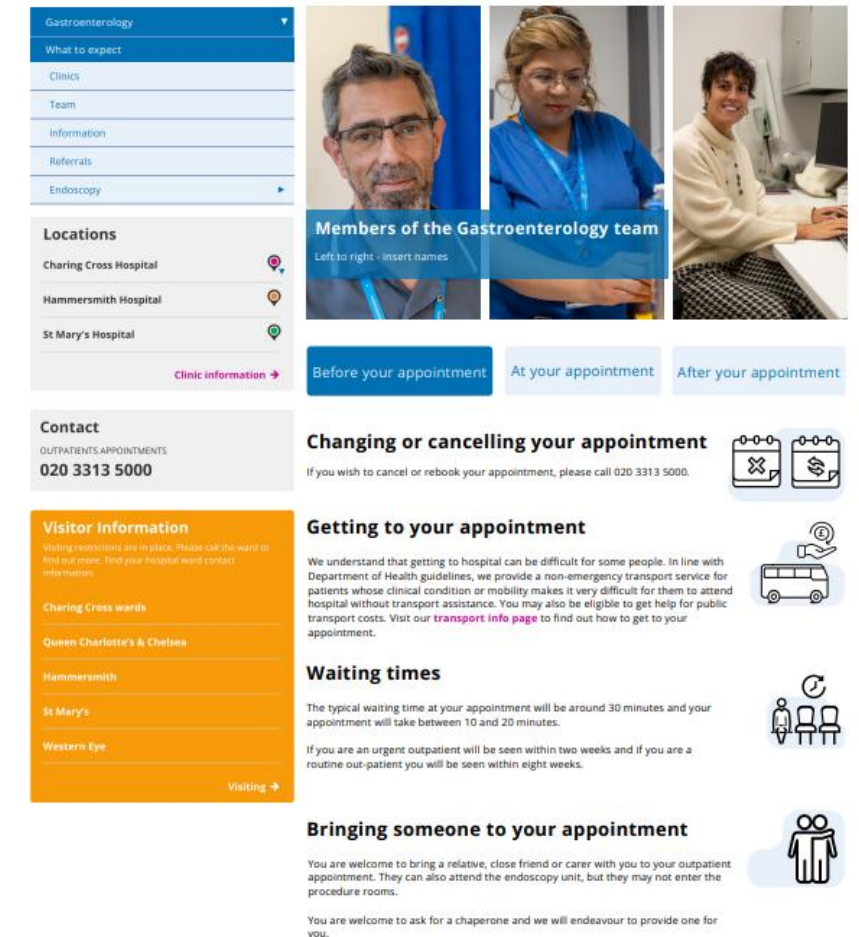
Reducing inequity in outpatient attendance

Behavioural science informed text messages and web pages

1. Help with transport to your appointment
2. Help with getting info on reimbursement for your travel costs to appointment
3. What to expect at your appointment



Gastroenterology - what to expect



Members of the Gastroenterology team
Left to right - insert names

Before your appointment

Changing or cancelling your appointment
If you wish to cancel or rebook your appointment, please call 020 3313 5000.

Getting to your appointment
We understand that getting to hospital can be difficult for some people. In line with Department of Health guidelines, we provide a non-emergency transport service for patients whose clinical condition or mobility makes it very difficult for them to attend hospital without transport assistance. You may also be eligible to get help for public transport costs. Visit our [transport info page](#) to find out how to get to your appointment.

Waiting times
The typical waiting time at your appointment will be around 30 minutes and your appointment will take between 10 and 20 minutes.
If you are an urgent outpatient will be seen within two weeks and if you are a routine out-patient you will be seen within eight weeks.

Bringing someone to your appointment
You are welcome to bring a relative, close friend or carer with you to your outpatient appointment. They can also attend the endoscopy unit, but they may not enter the procedure rooms.
You are welcome to ask for a chaperone and we will endeavour to provide one for you.

Can be applied to a range of healthcare challenges



Improving uptake of COVID-19 Vaccination through modifications to letters and text messages



Co-designing a communications strategy for Antimicrobial Resistance

Improving uptake of digital consent for surgical procedures



Considering how best to invite high risk men to attend for prostate cancer testing



Generating a communication strategy to improve staff vaccination rates



How to build in behavioural insights into quality improvement work

- **Take time to understand the behaviours and their determinants**
- Lots of frameworks available
 - EAST
 - Tests
 - Mindspace
- **Involve users at every step of the journey**
- Test and evaluate as robustly as possible



**www.changelabinnovations.org
changelab@imperial.ac.uk**





Life is so much brighter
when we focus on what truly
matters....

Change really does happen one person at a time...

What matters to you? International Day 6th June 2024

