

International Forum on Quality and Safety in Healthcare  
19 September 2019, Taipei.

# What matters to you?

**Siu Fai Lui** Adjunct Professor, The Jockey Club School of Public Health and Primary Care. The Chinese University of Hong Kong; Hong Kong.

**Göran Henriks** Chief Executive of learning and innovation, Sweden.

**Milton Lum** Consultant Obstetrician & Gynaecologist. Member of Malaysian Medical Council and Board of Governors of Perdana University; Malaysia.

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# What matters to you?

A quality healthcare  
concept and movement.

# A Vision for “What matters to You?”

2012 Michael Barry & Susan Edgman-Levitan

## **What is the matter? + What matters to you?**

*“What Matters” is a simple, yet profound concept that is key to creating deeply personal engagements with patients and their family members, a deeper understanding of what really matters to them, is the foundation of developing genuine partnerships for co-creating health.*



## 'What matters to you?' day - 6 June 2019

'What matters to you?' day aims to encourage and support more meaningful conversations between people who provide health and social care and the people, families and carers who receive health and social care.

# "What Matters to You?" Conversation Guide for Improving Joy in Work

**Understand what's meaningful  
to staff  
and the factors that contribute  
to burnt out by asking  
"What matters to you?"**

- What matters to you in daily work?
- How to build on assets: What helps make a good day? When we are at our best, what does that look like?
- What gets in the way of a good day?

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# What matters to you?

What matters to patient?  
and

What matters to healthcare staff?  
in different settings.

A Concept to An Action

**What matters to you?**

To

**I care “What matters to you”**

**A good relationship is two-ways**

**I care about “What matters to you”**

**You care about “What matters to me”**

**I need to know “What matters to you”**

**You need to know “What matters to me”**



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# What matters to you?

**Manvir and Emma:** What matters to you in healthcare  
- patient perspective from Singaporean and Malaysian Survey

**Milton:** What matters to you in healthcare  
Case studies, doctors statements, survey in Malaysia

**SF:** What matters in a good patient relationship  
To both patients and staff

**Goran:** Self-dialyses, peer support and a special house for cancer patients.

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‘WHAT MATTERS  
TO YOU?’ – AN  
ASIAN  
PERSPECTIVE

Manvir Victor and  
Emma Cartwright

@manvirvictor

@emmacartwrigh1

|

# RESPONDENTS DEMOGRAPHICS

	Singapore	Malaysia
Total participants	8 participants	17 participants
Recruitment method	Patient Facebook groups, hospital contacts	

Online survey using SurveyMonkey

No personal information from participants was gathered, other than the country they lived in.

# THINK OF YOUR MOST RECENT HEALTHCARE APPOINTMENT. WHAT WAS MOST IMPORTANT TO YOU?

Singapore	Malaysia
Medications	Seeing a doctor
Test results	Getting better
Additional information to manage health condition	HCPs listening to my requests
Reassurance	Getting correct information
Cost	Doctors explaining condition and treatment clearly
Getting correct information	Amount of time with the doctor
Being listened too	Test results
Empathy	Cost
	Friendly doctor
	Reassurance

# WHAT DID YOU HOPE TO GET OUT OF THAT APPOINTMENT?

Singapore	Malaysia
Information, advice and understanding***	Information, advice and understanding***
Good/normal test results**	Good/normal test results**
Reassurance	Time
Ways to reduce healthcare costs	To get better
Follow up actions	Pleasant conversation
	Not to leave with the usual bruise
	A workable solution

\*\*\*Most common answer

\*\*Second most common answer

# WHEN YOU HAVE A GOOD HEALTHCARE APPOINTMENT, WHAT MAKES IT GOOD?

Singapore	Malaysia
Reassurance***	Reassurance***
Cheap**	Gaining better understanding**
Encouragement	Friendly healthcare team
Good results	Good results
Doctor understands my needs	Short and efficient
Clear guidance and information	Time with the doctor
Feeling like the doctor cares	On time
	When the doctor really listens

\*\*\*Most common answer

\*\*Second most common answer

# WHEN YOU HAVE A GOOD DAY, WHAT ARE THE THINGS THAT MAKE IT GOOD?

Singapore	Malaysia
Good health***	Good sleep***
Family**	Good health**
Good sleep	Feeling well
When things go to plan	Feeling productive
Laughter	When things go to plan
Learning something new	People
Feeling productive	Music
Helping someone else	A polite and patient doctor
	Having an active lifestyle

\*\*\*Most common answer

\*\*Second most common answer



# WHAT ARE THE THINGS THAT ARE MOST IMPORTANT TO YOU AT THE MOMENT?

Singapore	Malaysia
Family***	Health***
Health**	Family**
Contributing to a cause or need	Having a good doctor
Money	Travelling
Happiness	Happiness
Staying alive	Successful career
Active lifestyle	Sleep
	Direction

\*\*\*Most common answer

\*\*Second most common answer

# WHAT, IF ANYTHING, WOULD YOU WANT YOUR HEALTH PROFESSIONAL ADD/CHANGE TO HOW THEY TREAT

Singapore	Malaysia
Share more information	Be more explorative
Lower costs	Nothing
Offer different management options	Provide accurate information
Nothing	Explain things more clearly (visual, charts)
Treat me as a friend	Shorter waiting times
Support me with mental well being	More effective medication
Appreciate lifestyle choices	Lower costs
Not to feel rushed	Spend more time with me
	More friendly
	Treat me like a human (not a number)
	Be honest
	Include me when designing services

# HOW COULD HEALTHCARE FACILITIES (HOSPITALS ETC.) BE IMPROVED TO MAKE THEM MORE PATIENT FRIENDLY?

Singapore	Malaysia
Reduce waiting times***	More facilities and staff***
Less crowded**	Reduce waiting times**
A helpline	Cleaner
Better IV drips	Less paperwork
Have emphatic doctors	Parking
Space and opportunity for peer support	Better visiting times
	Appointments on the same day
	Reduce costs
	Involve patients in the design

\*\*\*Most common answer

\*\*Second most common answer

# IS THERE ANYTHING ELSE YOU THINK IS IMPORTANT FOR US TO KNOW ABOUT WHAT MATTERS TO YOU?

Singapore	Malaysia
Support groups	Hospital charges
Subsidies for medication	More transparency
Personal touch	Support groups
More emotional support	Get doctors to have more specialised training
Stop making patients feel blamed	Waiting times
	Personalised care
	Caregiver support
	More information shared with patients

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# What matters to you in healthcare A doctor's statements

*Milton S W Lum*

*Consultant Obstetrician & Gynaecologist, Alpha Specialist Centre*

*Malaysia*

- ▶ Dr X made the following personal statements on his different roles at a lecture on “Medicine is an Art” recently

# As a doctor

- ▶ Medicine taught me much but I shall mention only two.
- ▶ I learnt early in school and in my career not to discriminate on race, culture, religion, money, social status, power or any other criterion that distinguishes one person from another. All my patients who came from all walks of life, were treated the same.
- ▶ In my interactions with them, there was anxiety, fear, worry, relief and joy. What they all wanted was care, comfort and reassurance...



# As a doctor

- ▶ ...The other lesson was that of humility.
- ▶ When I go to work daily, my intention is to do my best for my patients, to cure sometimes, to relieve often and to comfort always.
- ▶ Yet complications can and do occur.
- ▶ Whenever I thought I had got it all sorted out, something would happen which reminded me of the complexities and uncertainties of Medicine and the validity of Osler's statement that Medicine is not one of years but a life-long course.

# As a patient

- ▶ When I was aged 7, I was referred to the General Hospital Kuala Lumpur for radiotherapy as there were concerns about the growth of a congenital a-v malformation in my hand. I was struck with trepidation when informed by my mother and general practitioner.
- ▶ The consultant in the hospital, recognizing my fear, took me around the department before he even examined me. He explained what radiation did, its benefits and why I had to be left alone during treatment. This was repeated by the other two consultants prior to every treatment session.
- ▶ Like all boys, I was fascinated by technology. My curiosity was increasingly aroused and my fears receded with my looking forward to each visit. At the end of my therapy and consultations, I cried when my mother informed that we will not be visiting the department again.

## As a caregiver

- ▶ My wife, who was treated for cancer 25 years ago, was referred for a MRI. I did not accompany her as I had to undertake a scheduled operation.
- ▶ She did not understand an iota of the radiologist's explanation. The only word she remembered was "significant". When I saw the radiologist the next day, there was vagueness and reluctance to provide the report. This was surprising as full fees were paid for the MRI.
- ▶ The referring specialist stated that he did not agree with the radiologist's report. This was followed by consultations with two other radiologists and two other specialists who concurred with the referring specialist.
- ▶ The experience we went through was indescribable.

# What matters to you in healthcare

## *Malaysian study*

*M SW Lum\*, S Ammikapathi\*\*, C W Ng\*\*\*, & S L Boo\*\*\*\**

*\* Consultant Obstetrician & Gynaecologist, Alpha Specialist Centre*

*\*\* Doctoral candidate, University of Malaya*

*\*\*\* Associate Professor, University of Malaya*

*\*\*\*\*Editor in Chief, Codeblue*



## Malaysia's healthcare system

- Parallel public & private sectors
- Public sector services distributed widely & equitably
- Private sector in urban / semi-urban areas
- Effective communicable disease control programme
- Comprehensive primary care clinics in rural areas
- Excellent maternal and child health services
- Private sector – urban primary care / specialist clinics; broad range of secondary, tertiary services in private hospitals



## Survey

- No Malaysian data on “What matters to you in healthcare”
- Questions in English sent to everyone on database of Codeblue (portal of a think tank)
- Survey 15-28 February 2019

## Questions posed

- 1 What are the things that are important to you in health care at the moment?
- 2 What are some negative things at public hospitals?
- 3 What are some negative things at private hospitals?
- 4 What are some of the good things in public hospitals?
- 5 What are some of the good things in private hospitals?
- 6 When was the last time you went to a public hospital/ clinic / centre?
- 7 When was the last time you went to a private hospital / clinic / centre?
- 8 In the last 12 months, clinics/ centres/ hospitals from which area did you visit?
- 9 Are you a patient, healthcare provider, caregiver or others?
- 10 If you are a patient, what illness do you suffer from?
- 11 If you are a caregiver, what illness does the person you're caring for have?
- 12 What is your gender?
- 13 What is your age?
- 14 What is your ethnicity?

## Responders

<b>Responders</b>	<b>Number</b>	<b>%</b>
Patients	110	45.5
Healthcare professional e.g. doctor, nurse, allied health worker etc	32	13.2
Caregivers	30	12.4
Malaysian citizen who is currently not a patient	54	22.3
Others	16	6.6
<b>Total</b>	<b>242</b>	<b>100.0</b>



## Responders ethnicity

	<b>Survey (%)</b>	<b>Population (%)</b>
Malays	22	54.7
Chinese	56	22.8
Indians	12	7.0
Other indigenous groups	8	14.1
Others	2	1.4

## Responders age & gender

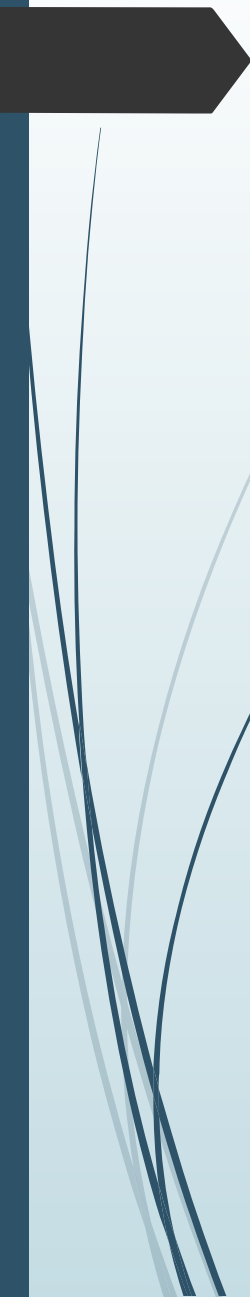
Age			Gender		
	Number	%		Number	%
18-35	78	32.2	Male	54	22.3
36-50	76	31.4	Female	175	72.3
51-60	49	20.2	Not disclosed	13	5.4
>61	39	16.1			
Total	242	100		242	100

## Last visit to hospital / clinic

	Public		Private	
	No.	%	No.	%
< 1 month	108	45.2	105	44.1
1-6 months	40	16.7	51	21.4
7-12 months	47	19.7	5	2.1
> 1 year	29	12.1	74	31.1
Never	15	6.3	3	1.3
Total	239	100	238	100

## Reported illness among patients (110) & cared for by caregivers (30)

	Patients		Caregivers	
	No.	%	No.	%
NCD (Heart disease, diabetes, hypertension, cancer)	84	76.4	18	60
Others (Flu, medical check up, genetic disease)	14	12.7	6	20.0
Mental illness	6	5.5	1	3.3
Allergies	2	1.8	2	6.7
Blood disorder	2	1.8	2	6.7
Gastrointestinal disorder	1	0.9	-	-
Infectious disease	1	0.9	1	3.3
Total	110	100	30	100



Important things in healthcare	%
Shorter waiting times at hospital	66.1
Cheaper treatments besides medicine	64.9
Cheaper diagnostic tests	52.9
More caring doctors	52.1
Cheaper medicines	51.7
Access to new drugs	51.2
Cheaper insurance premiums	51.2
Clearer explanations by doctors	49.2
Cheaper hospitalisation rates	47.5
More caring nurses	47.1
More flexible policies to take time off for healthcare	41.3
Better public transport to healthcare facilities	40.1
More flexible work policies to provide care for sick loved one	39.3
More convenient way for picking up repeat prescriptions	30.2
More convenient way of getting medicines	28.1

## Negatives at public & private hospitals

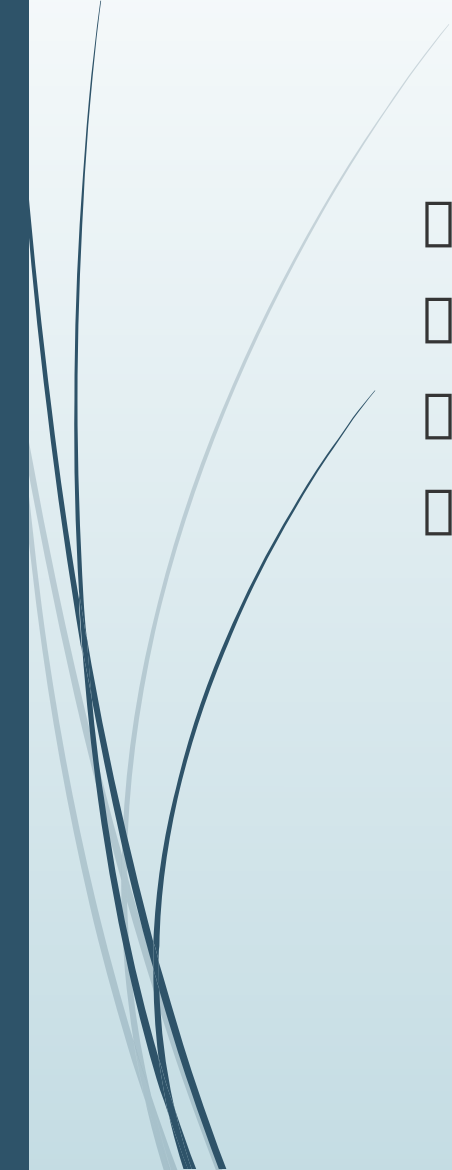
Public			Private		
	No.	%		No.	%
Too long waiting time	220	90.9	Too expensive hospitalisation rates	222	91.7
No access to new drugs	107	44.2	Too expensive medicine	209	86.4
Medicine supply runs out	93	38.4	Too expensive diagnostic tests	204	84.3
Uncaring nurses	88	36.4	Too many diagnostic tests	117	48.3
Uncaring doctors	79	32.6	Too long waiting time	38	15.7
			Uncaring doctors	30	12.4
			Uncaring nurses	22	9.1

## Positives at public & private hospitals

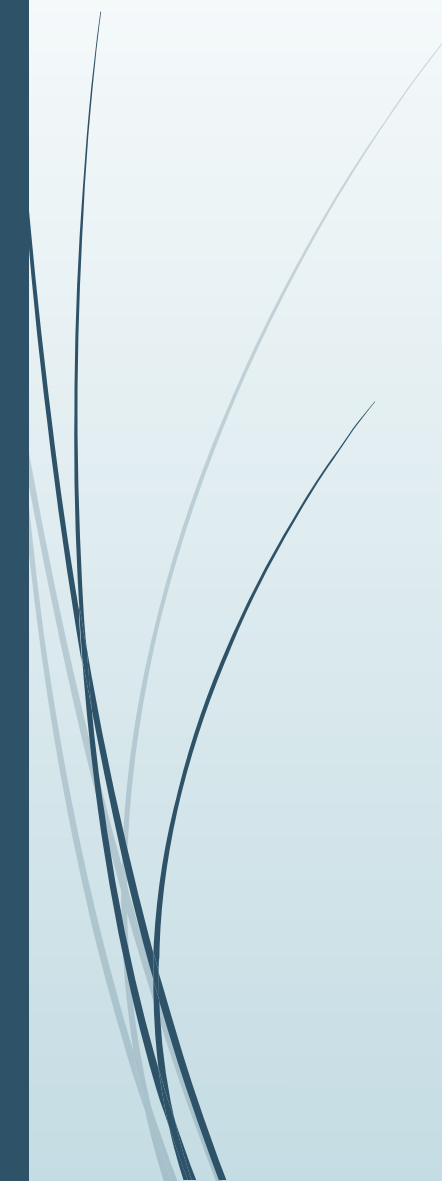
Public			Private		
	No.	%		No.	%
Affordability	160	66.1	Services provided	146	60.3
Services provided	39	16.1	Timely	94	38.8
Knowledge & experienced staff	37	15.3	Caring doctors & nurses	24	9.9
Caring doctors & nurses	19	7.9	Accessible	16	6.6



## Limitations of study

- Conducted in English
  - On-line survey
  - Sample size of patients & caregivers
  - No interviews
- 





*Thank you for your attention*

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# Patient relationships What matters?

Focus group meeting of  
Patient & Healthcare staff  
Qualitative Analysis



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**Prof. Eliza Wong**

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It is the intention  
and the wish of  
healthcare staff  
to provide  
good patient care.

It is a need  
and the wish of  
patients  
to receive  
good patient care.

Good patient care is the common interest.

A key element is a harmonious  
patient relation.

However for a public healthcare system,  
with limited resource  
and inadequate manpower  
to cope with unlimited demand,  
inevitably,  
patient relationship is challenging,  
if not at times, strained and difficult.

**A good relationship is two-ways**

**I care about “What matters to you”**

**You care about “What matters to me”**

**I need to know “What matters to you”**

**You need to know “What matters to me”**

# Good patient relationships What matters?

## What matters to both parties?

1. Key elements
2. Barriers
3. What each side can do?
4. What each side would like the other side to know / do?



Prince of Wales Hospital



United Christian Hospital



Tuen Mum Hospital

1-15 April 2019



Patient demographics	N = 30 (%)
<b>Age</b>	
31-40	1 (3%)
41-50	0 (0%)
51-60	7 (23%)
61-70	19 (63%)
71-80	3 (10%)
<b>Duration of care</b>	
0-5	5 (21%)
6-10	5 (21%)
11-20	9 (38%)
21-30	3 (13%)
>30	2 (8%)

Staff demographics	N = 27 (%)
<b>Profession</b>	
Doctor	8 (30%)
Nurse	12 (44%)
OT/ PT	6 (22%)
Dietitian	1 (4%)
<b>Experience</b>	
0-10 years	7 (26%)
11-20 years	13 (48%)
21 years +	5 (19%)
unknown	2 (7%)
<b>Place of work</b>	
In-patient	11
Out-patient	4
Both	6
Others	5



# Focus groups sharing of experiences

## **Many good experience:**

related to good care, individual behavior.

## **Also some not so good experience:**

related to care, systems, resource  
and individual behaviour.

If one hears the experience  
and the story from the other side,  
it would help both sides to understand each other.

# Patient focus group (some examples)

...即係病人從佢自己嘅利益去睇呢，一定希望得到最快最好嘅，但係客觀去睇，而家社會資源個分布呢，我覺得都係合理嘅，即係OK嘅...

...有病人有啲好唔合作架，佢啱啱姑娘幫佢做野呢，好有禮貌叫佢做，佢唔黎呢就跟手鬧架喇...

...我地參加個病人互助委員會，醫生、護士都有參與，都有機會見下面啊...其實好多醫生好有醫德嘅，但係有個別醫生，...好敷衍，...有時覺得個dignity或者個個心裡面呢，即係可能覺得有少少唔忿氣啊

...職業治療，係啊，啊張姑娘好好，有一輪我做做下叫我畢業，但我呢就忍唔住係咁喊，我而家難得有運動做，要我畢業我就自然反應就喊出黎，佢問我點解喊啊，我話有運動做囉，咁佢就話繼續俾我做...

...醫生吩咐你做個啲野，其實係從你嘅利益出發，如果你能夠做得足嘅話呢，你自己可以得到嘅效果好啲啦，如埋成個過程即係會，即係好一啲，成個過程，我覺得係非常之重要

...希望醫生呢就係企係病人個方面去睇病人，因為佢唔係易地處境，病人需要乜野 (易地而處)

...覆診好好嘅經驗 係我臨走呢，個醫生講努力啲啊，就係靠呢一句呢，我就開始做返太極，就全靠個醫生個句

...我一定要強調嘅，...你要人點樣待你，你首先要點待人。呢樣嘢我每一個人人都啱用嘅。

...你同佢講聲早晨，或者問候下佢先呢，咁佢就當堂就即刻就唔同 咗架喇

## Many important sharing and constructive suggestions

...又暈又剩，竟然問上去同你篤下手指話你冇事啊，你都係去睇急症，因為你當時入黎係水腫姐，我地同你放左水冇事你就走得架喇...

...那會鼓勵我做運動啦，就幫我食野個度戒口啊，會幫我講多啲喇，用時間俾我地...

...我個次覆診好好嘅經驗係我臨走呢，個醫生講努力啲啊，就係靠呢一句呢我就開始做返太極，同埋呢我又站槓左半個鐘...但係呢就係因為佢呢句說話，咁我呢就，覆診要交功課嘛...總之我四個月覆診之後呢，就好左囉，即係個平衡真係好左，就全靠個醫生個句，就係個句說話姐，鼓勵說話...

...醫生護士未必有咁多時間去解釋，第二就係有個病人小組呢，大家都係同一科嘅，大家都好傾得埋，有咩問題呢，由佢地再作呢個大家深入嘅研究，或者會，咁樣仲有機會...

...話溝通上，...唔好淨係對病人囉，大眾都要俾多啲資訊囉...

...我希望醫生呢就係企係病人個方面去睇病人，最重要一點，因為佢唔係易地處境，病人需要乜野，即係唔係十足即係佢辛苦啊，點辛苦啊，佢能夠以佢代入左病人個個心態睇你，就已經足夠喇...

...我去睇骨科呢，咁我係傷咗隻手啦同埋隻腳冇事嘅，咁我同醫生講，因為醫生寫紙呢淨係睇我隻手嘅啫，咁我話我隻腳都有事嗱咁，

**佢話你邊一樣嘢最痛我就睇你邊一樣**

...佢就好似，講笑形式話，「乜你好唔開心咩？」咁我就嚟喇，就刺激到我的系

統呀，神經系統，我就發脾氣，鬧佢，好似潑婦罵街咁去鬧人哋，開果個醫生。

**根本上就未出得院你就梗硬要佢出院，冇事又要睇返急症，**

雖然唔係話個180蚊嘅問題，而係個時間煩到屋企人嘅擔憂啊，

...見到我面都轉曬色，又標汗又暈又剩，竟然問同你篤下手指話你冇事啊

# Staff focus group (some examples)

...同理而家係一個資訊爆炸嘅年代，咁所以家屬或多或少呢，其實響網上或者會有一啲資料，而啲資料往往可能都唔係一啲好真實嘅地方，所以我覺得呢一方面其實 要將一啲誤解去同佢解釋返係比較大概挑戰

...佢地知嘢嘢甚至可能比我地仲多，係咧所以佢可能有好多好多問題問，點解你唔咁樣做，點解你無second choice畀我揀，點解其他patient係咁樣醫我地唔係咁樣醫 屋企人呀咁樣..

...你同佢點下頭ok啲，其實佢已經好開心㗎。我做過外科啦復康啦icu啦咁啊，就覺得同屋企人個關係呢真係要夠好呢咁就avoid到好多好多誤會同埋麻煩..

...如果對方係黑口黑面嘅話，其實你唔會想同個個人傾計，唔會想同個個人講嘢，你都會驚講多句都會引起一啲矛盾爭拗咁樣..

...但我最唔開心見到嘅呢就係病人覺得我地係服務行業而唔係一個專業囉。咁點解我咁講呢，因為我覺得專業行先服務會跟住嚟，但係如果調返轉我地只係一個服

... 你同佢點下頭ok啲，其實佢已經好開心㗎。我做過外科啦復康啦icu啦咁啊，就覺得同屋企人個關係呢真係要夠好呢 咁就avoid到好多好多誤會同埋麻煩

... 醫生可早少少做多一步同佢解釋個情況，咁屋企人就可能唔會有呢個問題出現，咁我哋處理方面又會輕鬆啲 ...同patient傾多啲，畀佢多少少 information, 佢知道個病係點嘅樣，會 appreciate

... 病人唔會個個都讚我，但今朝我睇15個，只要一個讚我，我就將件事記住寫低佢

頭先個病人點樣對我好，... 唔好覺得次次去clinic 就畀人趙畀人鬧

... 多啲 gesture 或者語言上 show一個 appreciation，可能好簡單咁多謝唔該...

... Say "醫生有心喇", "講拜拜", "你收工喇，姑娘辛苦你啦",

## Many important sharing and constructive suggestions

...因為佢好關心佢覺得我哋點解醫生又有護士都同佢講過住得嘅實話..

...因為醫生可能早少少做多一步同佢解釋個情況，咁屋企人就可能唔會有呢個問題出現，咁我哋處理方面又會輕鬆啲..

...發現原來同patient傾多啲偈，畀佢多少少information, 知道佢個病係點嘅樣，佢會好 appreciate你..

... Patient佢自己嚟有啲private fluid或者鍾意餵湯水咁有時某些嘅情況佢哋未必容許到咁樣做嘅時候，咁就一定佢都唔聽你解釋，鬧左姑娘或者我地先...

...我哋一般都會好早同佢講我哋個planning係點，你預期係點樣，咁佢中間有問題我哋都會做好多 education...

...畀多啲時間同空間我地姑娘去做呢一樣嘢。因為真係唔係唔想，但係事實上你真係要畀到我地，尤其是我地而家做緊果度，個turnover rate連姑娘個 turnover rate都好大，你都明白..

...其實training真係唔足夠，...譬如點樣同啲警末期癌症嘅病人去處理，特別嘅溝通技巧嘅，我覺得就幫得好多嘅咁..

...你話可唔可以請到啲醫生上去啲分享會上啲communication skills呢，除非你有經驗啦，如果唔係你好難教到佢哋去點樣handle, 即係話你點知道佢有啲動機嘅，又點知道佢想投訴嘅，其實好多事情呢其實趁佢發醉之前，其實你可以已經可

以解決啲 各需要話提到咁上可提到都唔好咁咁咁咁

... 病人覺得我哋係服務行業而唔係一個專業囉。

... 好多前線同事好驚就係畀人投訴，咁所以大家就會寧願唔去講畀個 patient 聽或者唔講畀屋企人聽，佢嚟緊個病人病情係點..

... 唔係啲姑娘唔想講、唔係啲醫生唔想講，可能佢地睇完之後就落去要衝症

... 都好希望去做多啲溝通，無奈不斷咁加workload, 食飯呀去廁所呢啲都無時間

... Expectation越來越高係肯定架啦...

## What matters Staff's some perspectives

- Patient not respecting healthcare professional
- Patient with unfiltered information from website
- Patient not accepting explaining
- Rising and unrealistic expectation
- Complaint attitude
- Lack support from PR department



## System

- **System / unclear procedures**
- **Limited resource  
Inadequate manpower  
Patient ++**
- **Long waiting time**
- **Short consultation time**
- **Different doctor on follow up**
- **Lack communication channel**
- **Low staff morale**

## What matters Patient's some perspectives

- Attitude of some staff
- Communication skill
- Doctor not respecting patient's wish



# Key elements in good relationships



Resource  
Management

Policy to support  
patient-healthcare staff  
relationship

Organization  
Culture of team  
collaboration and  
role in  
information  
sharing

Physical  
Environment

Staff Training

Public Education  
of Expectation  
Alignment

Transparency of  
System Operation

Accessibility &  
Flexibility

# Key elements in good relationships



Resource Management

Policy to support patient-healthcare staff relationship

Mutual Respect & Understanding

Organization Culture of team collaboration and role in information sharing

Engagement, Trust, Rapport, Partnership

Communication / information shared

Physical Environment



Staff Training

Engagement with Caregiver/Family

Empathy Attitude vs Appreciation

Public Education of Expectation Alignment

Transparency of System Operation

Accessibility & Flexibility

# Key elements of good relationships



**Patient's  
perspective**



**Staff's perspective**

Communication

Understanding / Accommodating

Attitude / Respect

Cordial

Trust

Partnership

Compassion

Manage expectation

Receive encouragement

Receive appreciation

# Barriers to good relationships



**Patient's  
perspective**



**Staff's perspective**

Resource / operation / process

Lack of communication

Skill of communication

Attitude (respect)

Manpower/ Workload

Complaint

Expectation gap



# What can be done (at system level)?



**patient's perspective**



**Staff's perspective**

Ensure appropriate resource / enhance operation

Manpower / workload

Support from  
middle and senior  
management

# What can be done (by individual party)?

## Patient

Need to communicate (better)  
with healthcare staff

Learn how to communicate

Mindful of one's attitude  
Respect the other

Be more understanding  
/accommodating

Patient mutual help group

Show appreciation to staff

Less complaint attitude

## Staff

Enhance communication  
(find time / make time, not easy)

Enhance communication skill

Mindful of one's attitude\*  
Respect the other

Be more understanding  
/accommodating

Provide effective information

More compassionate care  
More empathy

More encouragement to patient

\* Eye contact / look at patient / A



醫院管理局  
HOSPITAL  
AUTHORITY

和諧

# 互信 溝通 尊重

LET'S COMMUNICATE  
WITH TRUST AND  
RESPECT

『病人與醫護人員的關係，貴乎互相體諒和信任。大家多一些溝通，多一些包容，甚麼問題都可解決。』

“Good relationships between patients and healthcare workers very much depend on mutual understanding and trust. Any problem can be resolved through better communication and greater tolerance.”

再生會大使 馬浚偉  
Steven Ma Ambassador, Regeneration Society

尊重

溝通

和諧



## Good Patient Relationships

## Harmonious Respect Trust Communication

## Let's communicate with trust and respect



醫院管理局  
HOSPITAL  
AUTHORITY

和諧

尊重

溝通

互信

尊重

# 和諧 尊重 互信 溝通

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和諧



## Let's communicate with trust and respect

Take it one level higher  
+ What matters

## Let's communicate with caring what matters to each other 在乎對方在意甚麼



醫院管理局  
HOSPITAL  
AUTHORITY

和諧

# 互信 溝通 尊重

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和諧



## Specific actions

For both parties  
**To communicate**  
**talk/ discuss/ negotiate**  
有傾有講 有商有量

From staff to patient  
**Compassion care** 鼓勵  
**Encouragement** 關愛

From patient to staff  
**Show appreciation** 感謝

It is the intention  
and the wish of  
healthcare staff  
to provide  
good patient care.

It is a need  
and the wish of  
patients  
to receive  
good patient care.

Good patient care.

A harmonious patient relation.

Understanding “what matters” to both sides.

International Forum on Quality and Safety in Healthcare  
19 September 2019, Taipei.

# What matters to you?

**Siu Fai Lui** Adjunct Professor, The Jockey Club School of Public Health and Primary Care. The Chinese University of Hong Kong; Hong Kong.

**Göran Henriks** Chief Executive of learning and innovation, Sweden.

**Milton Lum** Consultant Obstetrician & Gynaecologist. Member of Malaysian Medical Council and Board of Governors of Perdana University; Malaysia.

**Manvir Victor** WHO Patient Advocate, Malaysia; Chairman of the Patient for Patient Safety, Malaysia; Board Member, Malaysian Patient Safety Council and Malaysian Society for Quality in Health.

Our success is measured in lives and health

Version 2017-02-16

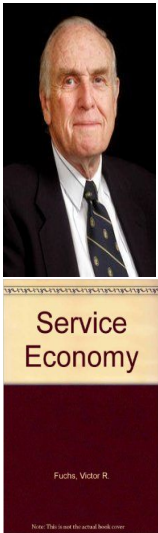
**Aim creates the system**  
Don B 10.05 today



@goranhenriks



# We can not continue the way we are doing it now



1968



” The biggest challenge is not to make people accept new ideas it is to making them abandon the old one  
John Maynard Keynes

**All service...at some level...is produced by professionals and those who receive the benefit.**

# What matter´s

Earlier



Vardagsliv

Stöd för kropp  
och själ

Primär-  
vård

Specialiserad  
vård

Redesigning our welfare system  
From reactive to proactive management  
Beyond today's patient records



@goranhenriks

# Autonomy and authority



Gadamer's definition –  
Health is "that you in joy can be occupied  
with your own life tasks".

[@goranhensriks](https://twitter.com/goranhensriks)

# The courage to see what is important!

- The need to feel appreciated , to be part of , and to be needed throughout life
- The need to allow my selves to feel good and be happy with what you do, on my own terms
- The joy of being active participant and co-creator
- The importance of being able to control my self and my life
- Courage to do new things



**Leva hela livet**  
Bjursell, Hultman



# Research in successful companies in Sweden

- Develop value together with the customer
- Management for sustainability
- Involved motivated employees
- Develop value developing processes
- Continuously improve the daily work and invest in innovations

Ref: Swedish Institute of Quality





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# Patient "Supporters" and trainers, Region Jönköping County



A3 Co-Production With Patients And Families: Moving From "Caring For" To "Caring With"

<https://youtu.be/DVjIRIKmE8o>



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# Explore and Improve together

- **Co** learning
- **Co** llaborating
- **Co** creating
- **Co** nnectivity







# Health café

## Resources

Living library

Storytellers

Volunteers

Health coaches

## Meeting places

Self help groups

Heart's house

Learning café

Recovery

180906

@goranhenriks



# Living library



# Esther



# Café House of Health – about life, autonomy and authority

- For patients with chronic diseases and relatives
- Focus on health and well-being
- Supports the living of life with chronic conditions , maintaining autonomy
- The possibility of support and hope through conversations with other people experience





# We are all different and have different needs and expectations in different life circumstances and times in life

**Independent  
and  
engaged**



**Anxious  
and  
engaged**



**Traditional  
and  
unconcerned**



**Vulnerable  
and  
anxious**



Reference: SALAR

# Patient compact for an integrated network work



@goranhenriks



Role play is a good way to understand issues,  
especially reverse role playing by both parties.

A role play drama which illustrated  
by knowing “what matters” to both sides,  
conflict can be resolved.





# A Healthcare Drama

我在乎你

I care about you

Hospital Authority Convention 2019, Hong Kong  
A session on Patient Relations



A busy doctor rushed down to the out-patient clinic to see the waiting patients. He was late as he had to attend to a very sick patient. A concerning daughter accompanied her father to the clinic. She was upset by the delay, need to rush back to work.

An abrupt consultation led to misunderstand on the treatment options  
=> **an argument.**

Resolved when both sides understood each other on  
**what matter to each of them.**

A happy ending with the patient offering the doctor a piece of bread, (aware the doctor did not have lunch, having to rush down to the clinic).





Role play  
by  
Hospital CE  
Medical staff  
Nursing staff  
& Patients

The forum  
was attended  
by patient groups

