




5 countries'
experience toward
deployment in your
system

Introductions

hello my name is...



What matters to you today?

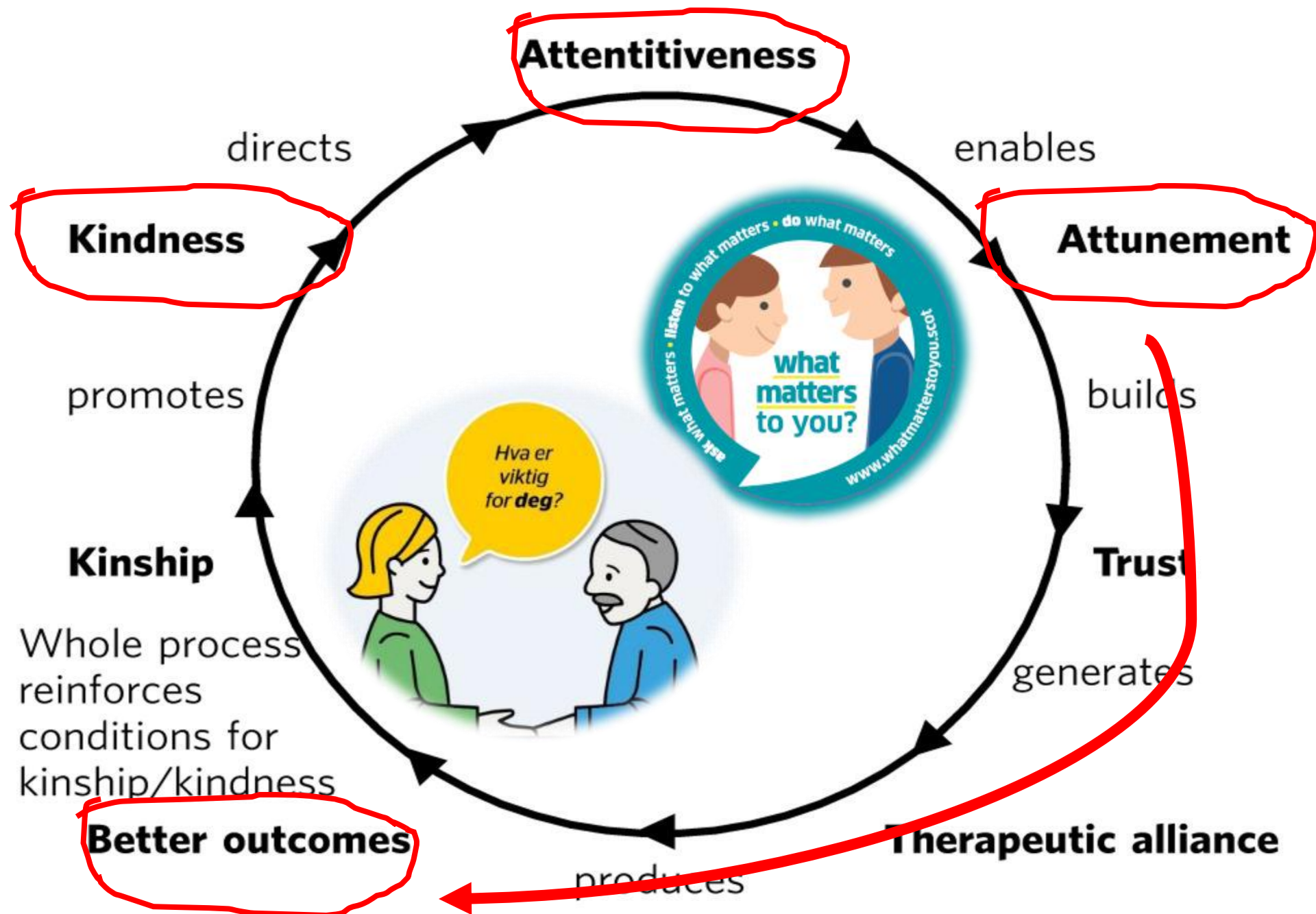


WHAT MATTERS TO YOU?



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





In the beginning....

...How it all started

The Power of Attentiveness: How It All Started

P6

PERSPECTIVE

SHARED DECISION MAKING

Shared Decision Making — The Pinnacle of Patient-Centered Care

Michael J. Barry, M.D., and Susan Edgman-Levitan, P.A.

Nothing about me without me.

— Valerie Billingham,
Through the Patient's Eyes,
Salzburg Seminar
Session 356, 1998


Caring and compassion were once often the only “treatment” available to clinicians. Over time, advances in medical science have provided new options that, although often improving outcomes, have inadvertently distanced physicians from their patients. The result is a health care environment in which patients and their families are often excluded from important discussions and left feeling in the dark about how their problems are being managed and how to navigate the overwhelming array of diagnostic and treatment options available to them.

tive of patients: respect for the patient's values, preferences, and expressed needs; coordinated and integrated care; clear, high-quality information and education for the patient and family; physical comfort, including pain management; emotional support and alleviation of fear and anxiety; involvement of family members and friends, as appropriate; continuity, including through care-site transitions; and access to care.¹ Successfully addressing these dimensions requires enlisting patients and families as allies in designing, implementing, and evaluating care systems.

This concept was introduced in the landmark Institute of Medicine (IOM) report *Crossing the Quality Chasm*² as one of the fundamental approaches to improving the quality of U.S. health care. The IOM defined patient-

for the rest of one's life, and screening and diagnostic tests that can trigger cascades of serious and stressful interventions.

For some decisions, there is one clearly superior path, and patient preferences play little or no role — a fractured hip needs repair, acute appendicitis necessitates surgery, and bacterial meningitis requires antibiotics. For most medical decisions, however, more than one reasonable path forward exists (including the option of doing nothing, when appropriate), and different paths entail different combinations of possible therapeutic effects and side effects. Decisions about therapy for early-stage breast cancer or prostate cancer, lipid-lowering medication for the primary prevention of coronary heart disease, and genetic and cancer screening tests are good examples. In such cases,

 An audio interview
with Dr. Barry is
available at NEJM.org



Flipping the Question

Not only “*What’s the matter?*”
but also “*What matters to you?*”



A Norwegian farmer & his hut...



My DAD'S NAME IS SMARTIN
 My MOM'S NAME IS CEDONARDORDES

What Matters To Me

My NAME IS KENDRA I AM 7

I HAVE Autism

I Can't SPEAK
 So I won't be able to if it Hurts

I CAN MAKE NOISES

I CAN'T HAVE Grapes
 As it MAKES ME Blochey

I AM VERY FAST And will Put things in my Mouth And CAN MAKE A Run for it HA HA HA!

I CAN Dress my Self WITH some help

I CAN Do HIS

I Love Noise Toys

I will BANG My HEAD AND Bite my HAND When I am Frustrated

Some time my hair gets tangled (My Dad is Rubbish at Doing my HAIR "NEEDS ALOT OF HELP")

I Love Cuddles to REASURE ME

24.10.2013

HAIR

I Love Cuddles to REASURE ME

24.10.2013

I CAN Dress my Self WITH some help

I CAN Do HIS

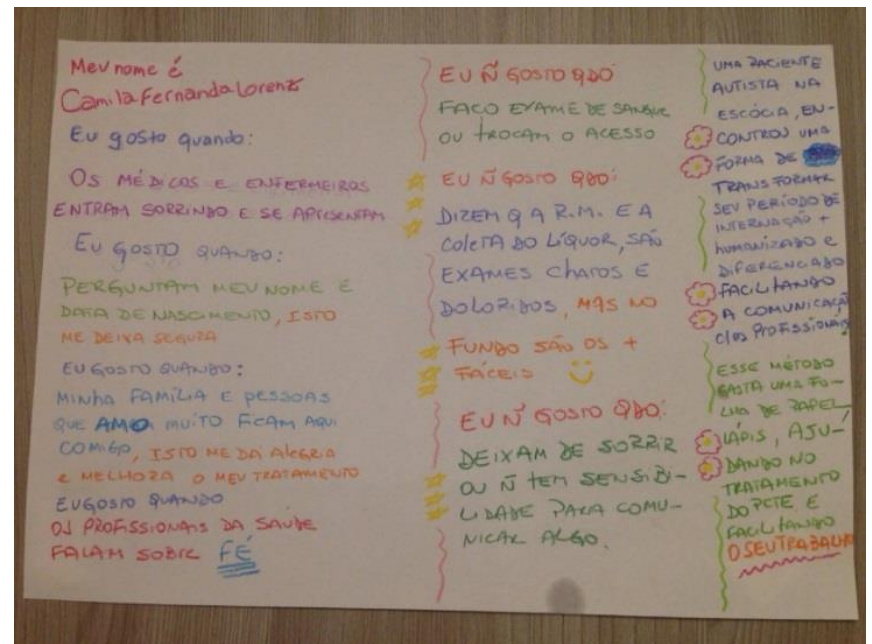
I Love Noise Toys

I AM VERY FAST And will Put things in my Mouth And CAN MAKE A Run for it HA HA HA!

I AM 7

I Don't like medicen by my Mouth "So WATCH OUT I will struggle" As per Job

I love to feel Peoples

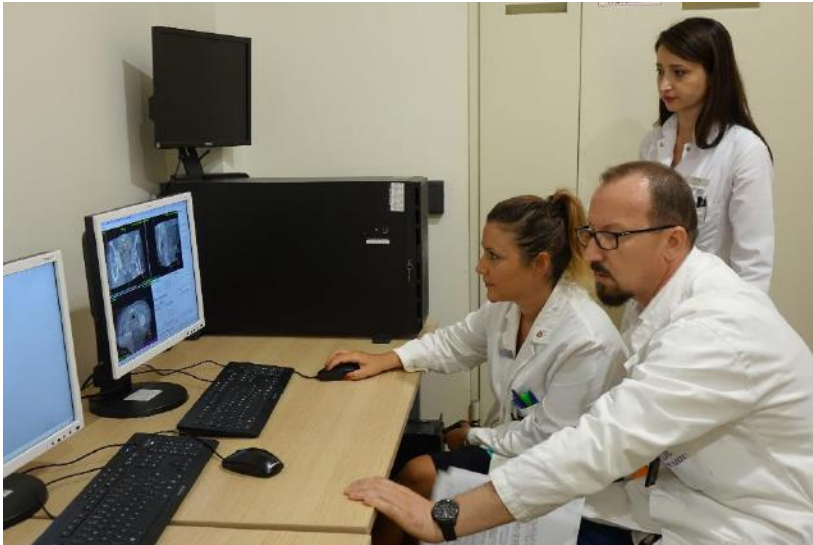


Kindness bundle

- Opening and closing interactions with patients in a structured way
- Warm personal introduction
 - *“What would you like me to call you?”*
- Shared decision making
 - *“What matters to you?”*
 - *“What about today? What would make today a good day?”*
- Warm close-out
 - *“Is there anything we can do to make you more comfortable?”*



Today's Care



Digital Care





Why *what matters*
really matters....

**what
matters
to you?**

You Can Make A Difference



@DementiaCarerVo
@tommyNtour
#wmt19
#cnoscot

<https://www.alliance-scotland.org.uk/people-and-networks/dementia-carer-voices/>

www.facebook.com/DementiaCarerVoices


www.tommyontour2011.blogspot.com

tommy.whitelaw@alliance-scotland.org.uk
dementiacarervoices@alliance-scotland.org.uk

More than 17,000 pledges
"What matters to YOU?"

#lead2add #CNDScot
Care "starts" in
your heart 



PLEASE... BE KIND 
Name... not condition

#hello my name is

YOU CAN MAKE A DIFFERENCE

As a CARER, Sometimes I FELT

• helpless
• alone
• scared



People may be
scared...
What can we
do to help
+ support?



750 'talks'
over 4
years



Mums + Dads
'make it better'
for us. We need
to help, make it
better for them.

#wmtyl18

"PLEASE DO NOT...
use the word
'challenging'...
.. it's MY MUM, Joan..
NOT 'the wee woman
with dementia'"

ASK what matters
LISTEN to what matters
DO what matters.

People CAN CHANGE lives,
What can YOU do?

PLEASE
ASK 

Are you OK
that I'm
doing this
with you?



#letters,
lives +
love stories

ENSURE DIGNITY
AND RESPECT

People want to
be able to stay
in their own home.
To be 'cared for'
in their own home
for as long as possible.



Be "The ONE"
who makes a
DIFFERENCE!



"What Matters to you" Day
6/6/2018
#wmtyl18

@tommyNtour

tommy.whitelaw@alliance-scotland.org.uk

What Matters To Me







Spreading
WMTY
Locally

What matters to you? – A local story from the Royal Free London

James Mountford, Director of Quality, Royal Free London NHS FT



@mountfordjames
james.mountford@nhs.net

The Royal Free London Hospitals: Royal Free and Barnet...




world class expertise  local care

Royal Free London 
NHS Foundation Trust




...and Chase Farm Hospital



Jan 2017: WMTY started at the Royal Free...(thank you Jen!)





What Matters to ME



1. NO Moaning

Rules






2. Help ME


3. Knock before you come in my room!

4. Have activities for me while stuck in bed!


5. Don't forget about me!



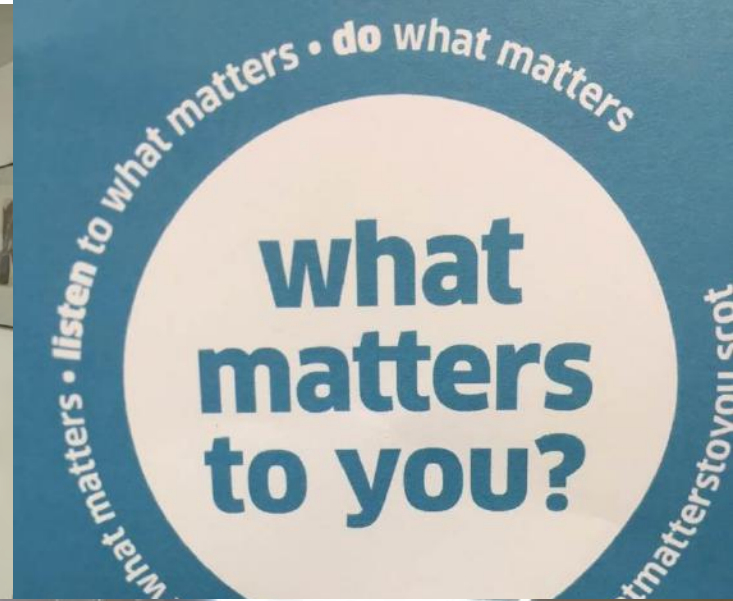




Debbie's parents.



7 June 2017, our first “WMTY-day”: focus on WMT-patients






A tool to have a better conversation

Name:	Ward:	Date:
-------	-------	-------

<div>My expectations of this admission....</div>	<div>Things that worry or annoy me...</div>
--	---

<div>What matters to me....</div>	<div>What's important to me today....</div>
	
<div>I like to be called...</div>	

How to best support me.....

You might be surprised to know...

Patient, family and friends...Please feel free to share information, ideas...

With thanks to Karen Turner

I want to feel
safe....

67 year old lady with
metastatic breast
cancer

I want the pain to stop

62 year old man with prostate
cancer and bone mets

I want to get home and
get out of here

82 year old lady with end stage
liver disease

I want to be with my
children a bit longer

52 year old lady with
metastatic anal cancer

What matters today
is you're giving me
some time to talk

58 year old lady with
metastatic breast cancer

I want my legs to work
again

77 year old lady with advanced
metastatic breast cancer and
COPD

For it to be over

58 year old man with lung
cancer

I want to see the
people I love
today

67 year old lady with
Glioblastoma

I want to go
outside

80 year old lady in
respiratory failure

I'm worried that
I'm bed
blocking...

88 year lady with ca
pancreas

To be healthy, walk
and do things for
myself

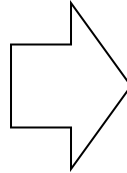
96 year old lady with
cholangiocarcinoma

"I know I'm dying.
When I die, I don't want
you to tell my wife over
the phone. Please let
her know face to face"

68 year old man with
liver cancer

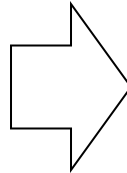
Quickly actionable (for free, often)

“My syringe driver keeps getting caught. It’s in my right arm and I’m right handed”



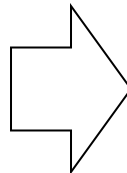
Move access to left arm

“I don’t want my wife to hear I’ve died over the phone”



Arrange family meeting to cover this and work out a solution

“I want to go outside—can I go in the garden?”



Make arrangements for the patient to go outside in their bed

"What matters
to you?"

What did our
Therapists
say?

I learnt about
my patients
concerns and
worries

I learnt
information that I
would not have
known

I learnt patient was
on the wrong
management

Patients want to look
and feel presentable

Patients are
relieved when
their concerns are
validated.

Its important
patients are
listened to

As therapists, we should
not go into see a patient
with our own
assumptions about
WMTY

It enhanced my
interaction by
removing
boundaries

Asking WMTY
helped me get
to know the
patient better

More time is
needed to
talk to
patients

Small things
can make a
big difference

Asking
WMTY is
patient
centred

Patients want
to be involved
in their own
care

Asking WMTY
gave patient
confidence to
ask about other
issues, not just
physical/therapy
related

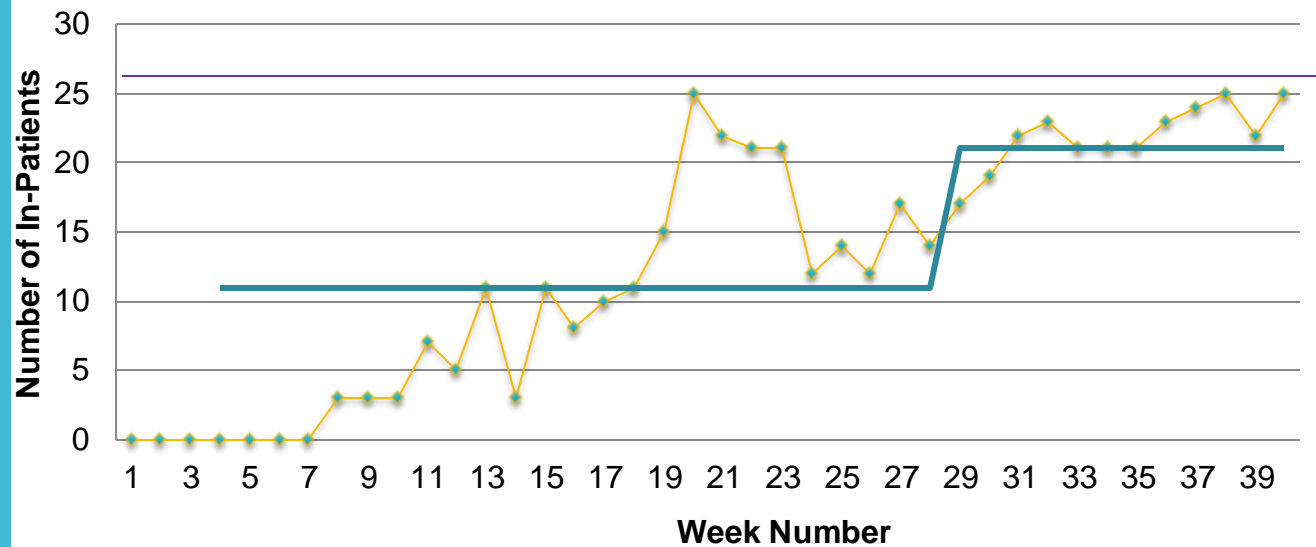
I will ask
more open
ended
questions

I will ask
WMTY again

I will
remember
to smile

Number of WMTY conversations

**Number of Patients who have WMTY conversations
discussed in weekly MDT**



What has been the impact?

Team Meetings now have the patient at the centre

The MDT is for the first time, truly patient focused"

Palliative Care Consultant

Focus of resources

"I don't mind which nursing home I'm discharged to, just want it to be the closest one to my sister".

In-patient

Improved Care

"In the past, I'd too often assumed what matters, now I know and our care is better"

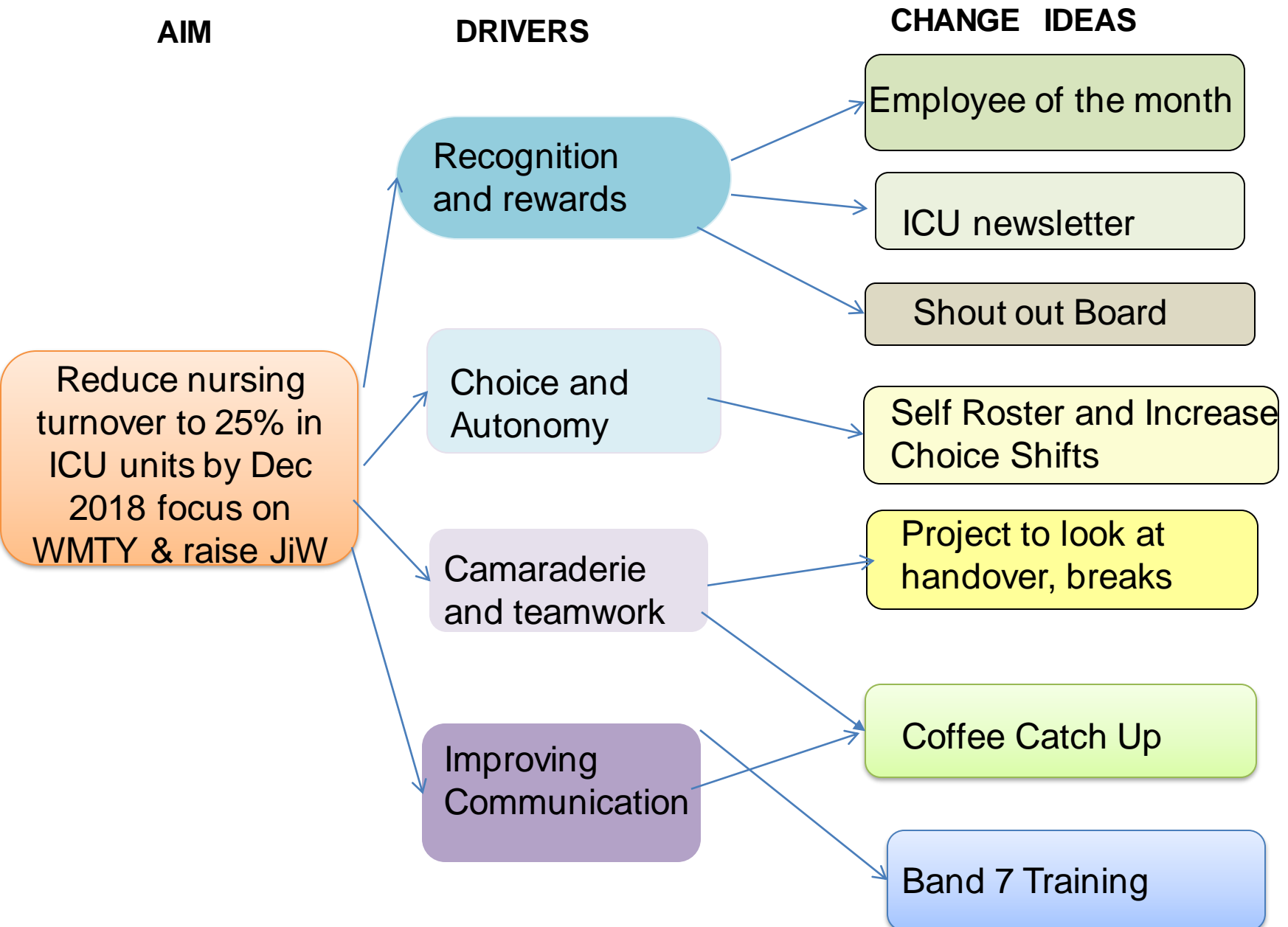
Band 5 Physiotherapist

More meaningful relationships and job satisfaction

Asking WMTY has helped me connect with patients on a deeper level.

CNS Palliative Care

What if we applied this to staff, to improve things for them?



ICU Nurse Retention

Aim: To reduce ICU nursing turnover to 25% by 31 Dec 2018

What matters to ICU staff?

- “More choice and flexibility with shift choices”
- “Having prompt access to professional courses”
- “Having more access to senior staff”
- “More positive and constructive feedback”

What ICU staff have done

- Set Up electronic rotas with increased number of shift choices
- Every band 5 nurse has an appropriate course booked as part of induction
- Weekly Coffee Catch-ups with matrons set up for all staff
- Employee of the month, ‘*Shout Out Boards*’, monthly newsletters

world class expertise  **local care**

NHS
Royal Free London
NHS Foundation Trust

With thanks to Jasmina Davies

“Completing the rota is so much easier as staff have written in what they wish to work. Most of the time they are allocated the shifts they wanted”

“Bank nurses can pick up extra shifts any time, anywhere”

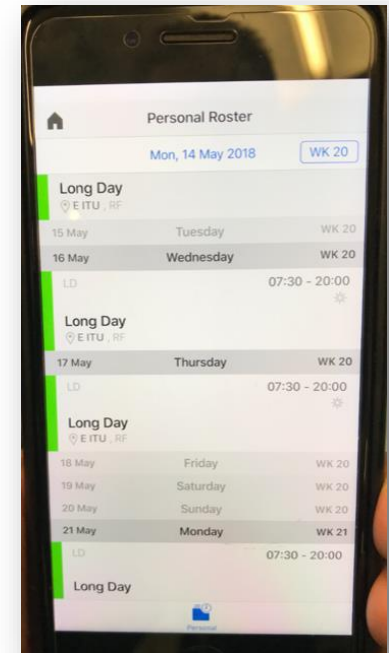
“If you have a spare 5 minute you can request your shifts, my friends cant believe I write my own rota!!”

“It helps my work life balance, I can choose my days and in particular my nights”

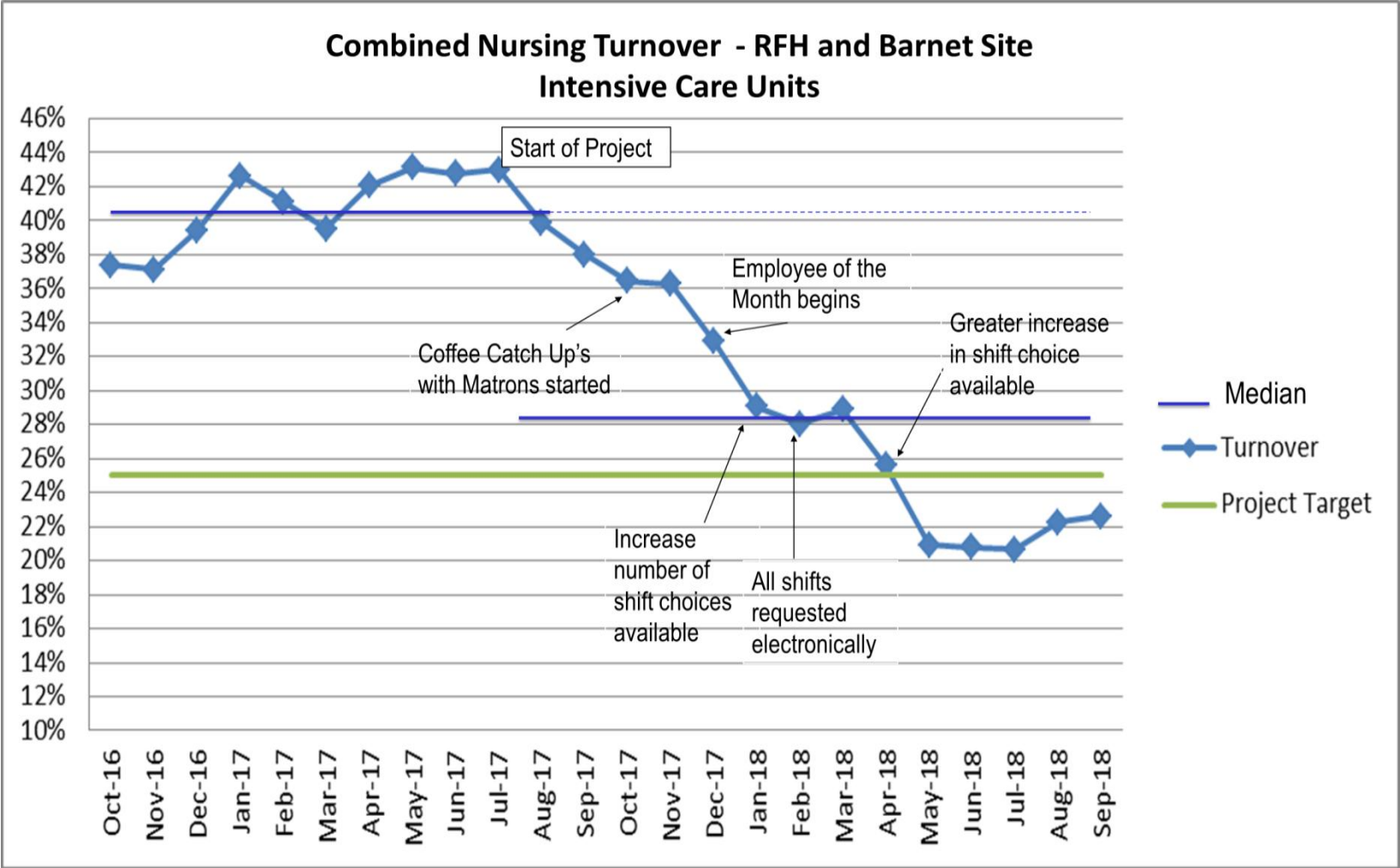
“Its great, you can choose your shifts when grabbing a coffee”

“Its so simple to use, I often log on when I’m at the tube with Wi-Fi”

“My work life balance has really improved with the self rostering online, I can write mu shifts when I’m at home...”



ICU Nurse retention: Results



6 June 2018, our second year: focus on WMTY for staff



‘What matters to you?’ day on 6th June aims to encourage and support more meaningful conversations. Through these conversations we hope to improve staff enjoyment in the workplace.

We want to ask our colleagues three questions:

What makes for a good day for you?
What makes you proud to work here?
When we are at our best, what does that look like?

If you would like to get involved and run a ‘What matters you? Day event or activity for your colleagues please contact Natalie Ware at Natalie.ware@nhs.net







To help us to look at and act on your responses by area and staff group, it would be helpful if you could provide the below information:

- Your ward/ area/ speciality:
- Your division:
- Your role:

What matters to me working at the Royal Free London is.....

Everyone being in a good mood. Interesting patients

Friendly pts & relatives.

Chocolates on the wards.

Having a good team.

What makes for a good day for you?
What makes you proud to work here?
When we are at our best, what does that look like?





what
matters
to you?

Will you join the
"What matters to you?"
conversation?

"What matters to you?" day on Wednesday 6 June
aims to encourage and support more meaningful
conversations between people who provide health
and social care and the people, families and carers
who receive that care.

For more information about "What matters to you?",
visit www.england.nhs.uk/what-matters-to-you



whatmatters
toyou

What matters to me ? 2018

Helping my wards to be the best that they can and
for them to be happy in their work

They are all stars !

Shame about the cakes but I tried

Lindsey Matron







The big themes we heard across all our sites

- Providing great patient care
- Teamwork
- Being appreciated & valued
- “Fairness”
- Happy & friendly staff/ colleagues (who smile!)
- Honest, open communication
- Predictability
- A good work environment (& somewhere to rest)

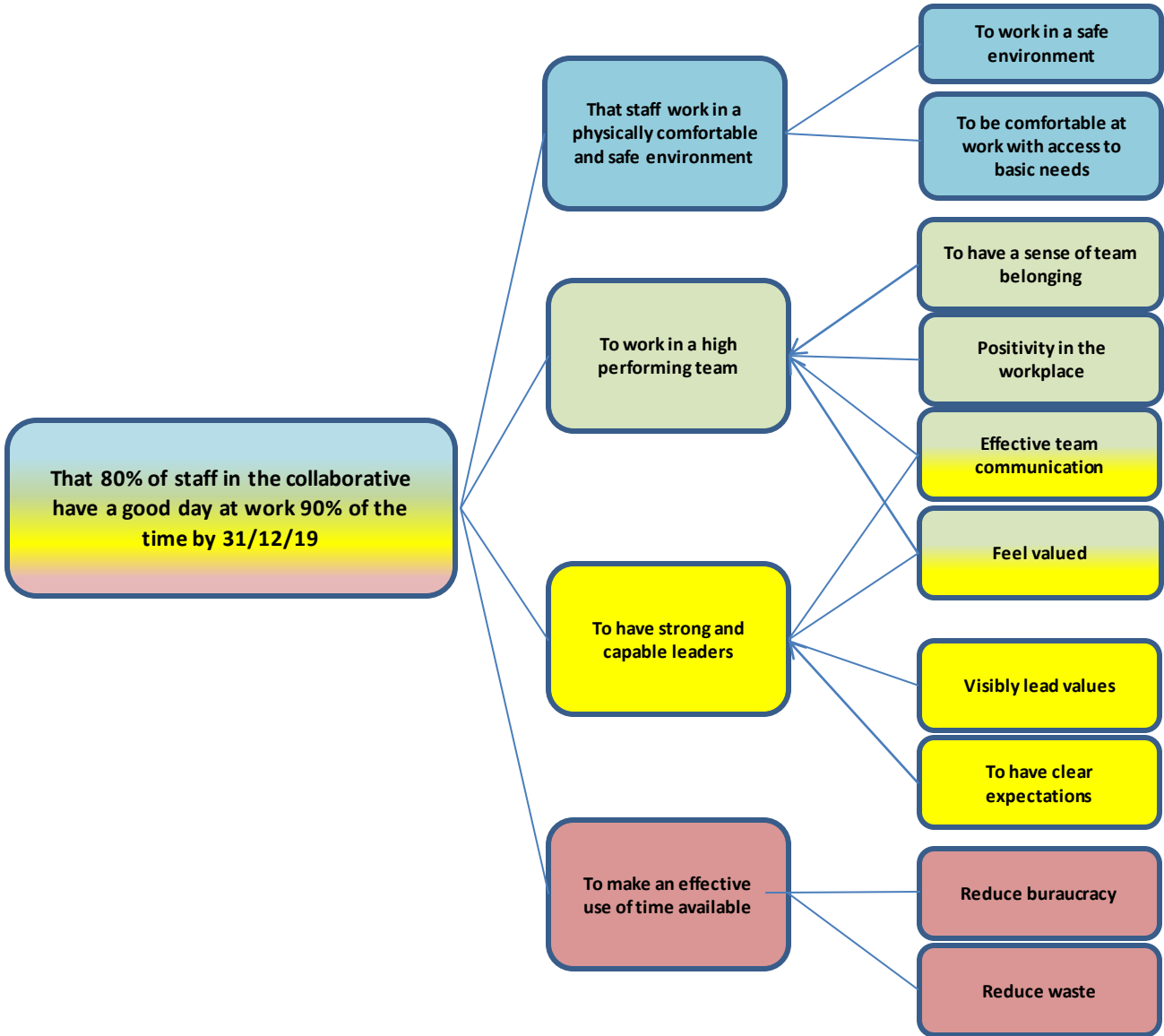
Royal Free London
Tel: 020 7608 1234
What
for you
When we do it
what does it
1. We're doing
working in
the 2000s
2. Step in
pose or 3
3. Take away the

MS
Please note,
RFL Commu
freenet, free

Jay at hWork.



And next a trust-wide effort on Joy in Work



WMTY now core to our improvement training



Also useful to ask when
developing services





Reflections and lessons learned

- WMTY: a powerful driver of improvement, and culture change
- For patients
 - You can't guess what matters to patients
 - What matters can change; ask more than once
 - Invigorating for staff
- Not only for patients
 - For staff too
 - Can be threaded through all aspects of work/learning
 - Can help service development
- Involve everyone, celebrate, and ...



...Have courage (just try it!)



Thank you



@mountfordjames

james.mountford@nhs.net



20 minutes please



Spreading
WMTY
Regionally



Institute for
Healthcare
Improvement

Glasgow

Session xx

WMTY: Impacting Patient Experience and Joy in Work



Damara Gutnick, MD, FACP

Joan Chaya, MA

#JOYMHVC #IHIFORUM @DrDamara1 @schaffero9

Who are we?



Damara Gutnick, MD, FACP

Medical Director

Montefiore Hudson Valley Collaborative

Joan Chaya, MA

Senior Director Workforce Development

Montefiore Hudson Valley Collaborative



Disclosures

Damara Gutnick, Joan Chaya, have no relevant financial or nonfinancial relationship(s) within the services described, reviewed, evaluated, or compared in this presentation.

The only thing we have to disclose is our passion for this topic!



Session Objectives

- 1) Demonstrate how MHVC spread WMTY regionally to improve the patient experience in multiple care settings



What is the MHVC?

The Montefiore Hudson Valley Collaborative



One of 25 Performing Provider Systems (PPS) in NYS

195K Attributed Medicaid lives

A diverse network of providers created to achieve DSRIP goals!

Hospitals, BH & SU Providers, FQHCs, Primary Care, Health Homes, Care Management, LGUs, CBOs

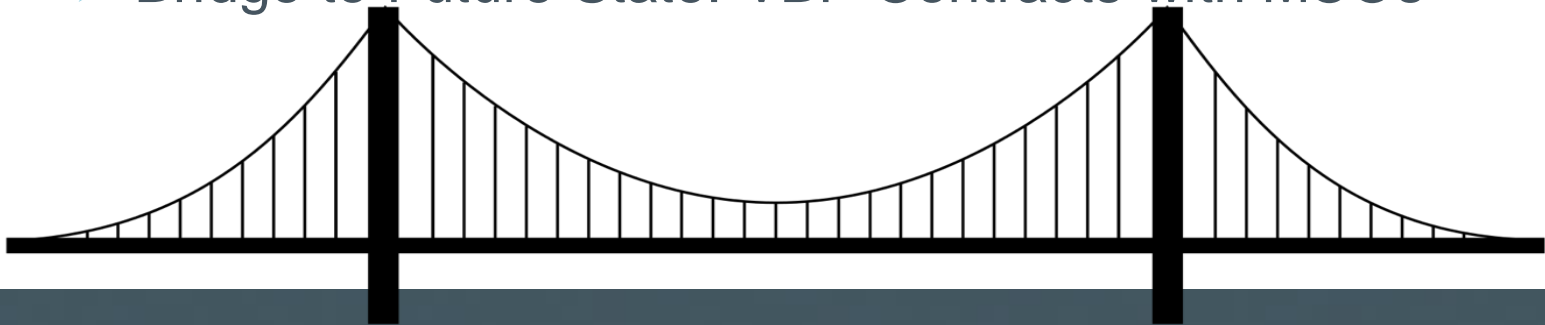
Spans 7 Hudson Valley counties

Westchester, Rockland, Orange, Putnam, Ulster, Dutchess, Sullivan

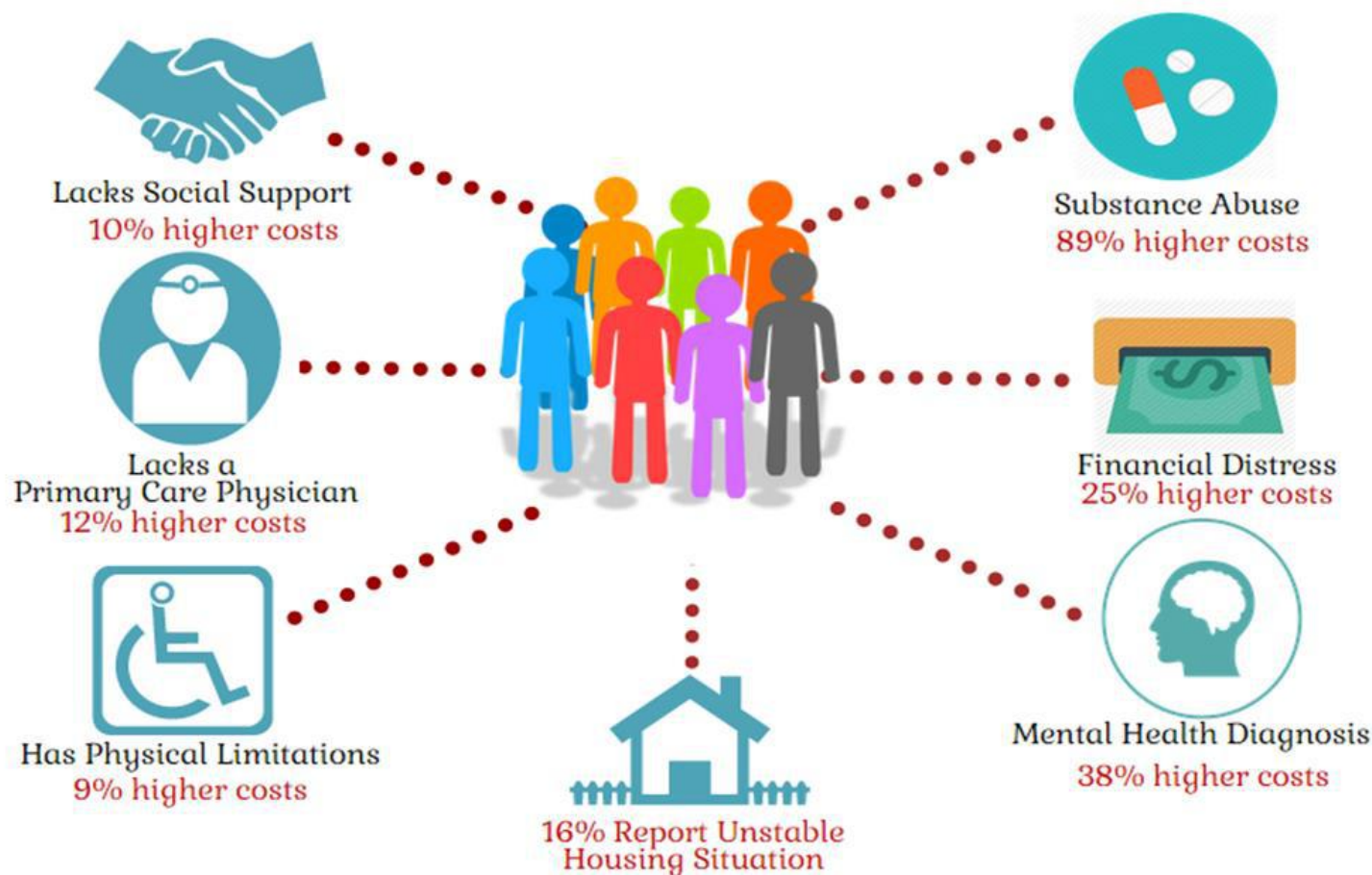


What is DSRIP?

- Medicaid Redesign Waiver (\$8.4 Billion)
 - Funds earned based on ~ 60 Pay for Performance measures for attributed lives
- Delivery System Reform Incentive Payment (DSRIP) program - Five Years
 - 25 Performing Provider Systems (PPS) in NYS
- Goal: Shift the Payment System
 - “Fee for Service” → “Pay for Performance”
 - Bridge to Future State: VBP Contracts with MCOs

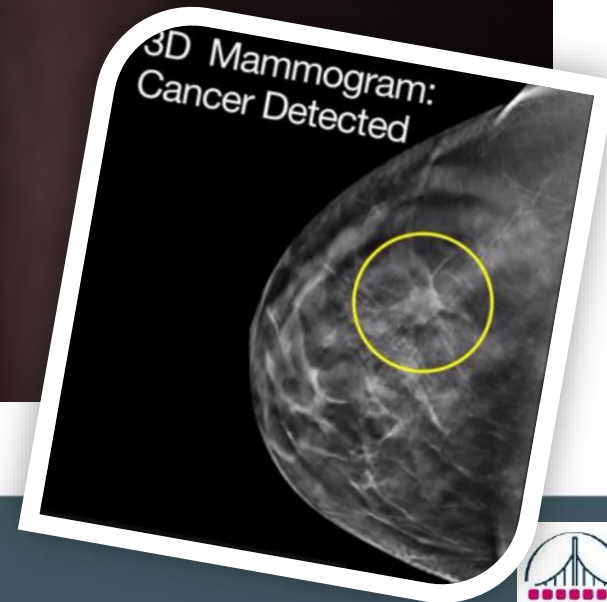
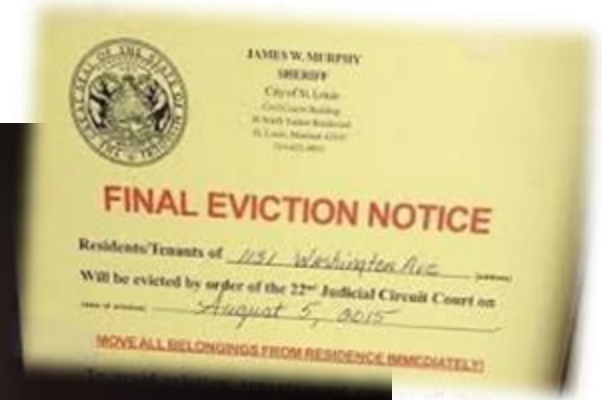


Social Determinants of Healthcare Costs



A Personal Story: Jennifer

What Matters to You?



What Matters May Include. . .

Social Determinants of Health (SDH)

What Matters
to You?

I am being
evicted.

My kids are
hungry

I can't get to
appointments

My son
uses drugs



Our WMTY Journey

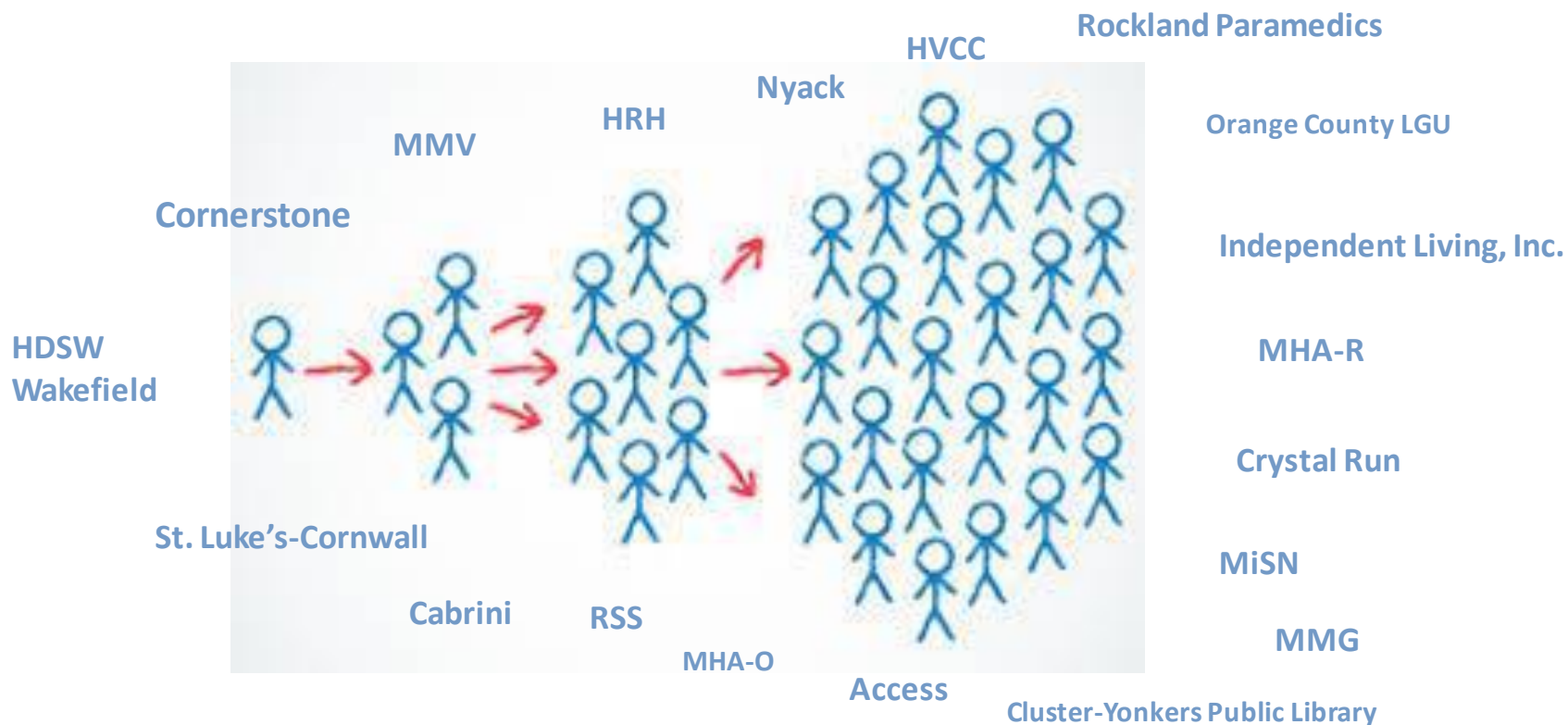
**Introduced at Regional
Meetings March 2017**



Leaders Demonstrating Commitment to Patient Centered Care



Creating a “movement”. . . .

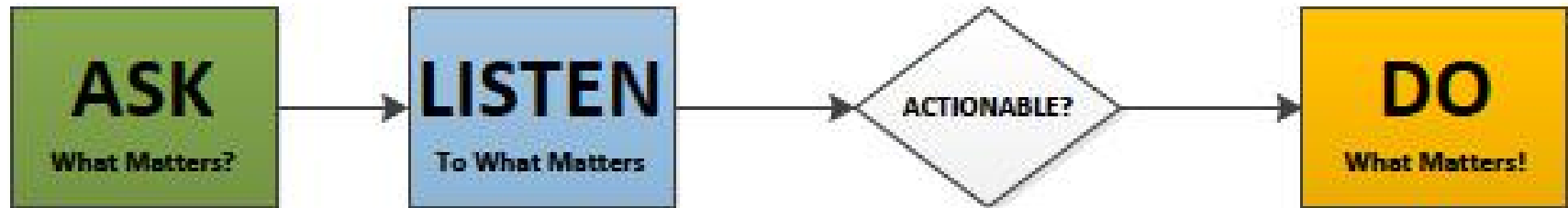


WMTY Adaption



Integrating WMTY with Multiple MHVC Partners

- Strategies
 - Word of Mouth
 - Structured role out
- Broad Application Across the Continuum of Care
 - Community Based Organizations
 - Behavioral Health - Living Room and Club House
 - Readmission Reduction (Hospitals)
 - Skilled Nursing Facility





Yes



NO



Motivational Interviewing Spirit & Skills



MI SPIRIT

Compassion
Acceptance
Partnership
Evocation



OARS

- Open Ended Questions
- Affirmations
- Reflections
- Summaries



Yes



NO



=



Motivational Interviewing Spirit & Skills



MI SPIRIT

Compassion
Acceptance
Partnership
Evocation



OARS

- Open Ended Questions
- Affirmations
- Reflections
- Summaries

WMTY Implementation Stories of Impact



Cabrini Skilled Nursing Facility



ASK

What Matters?

LISTEN

To What Matters

DO

What Matters!

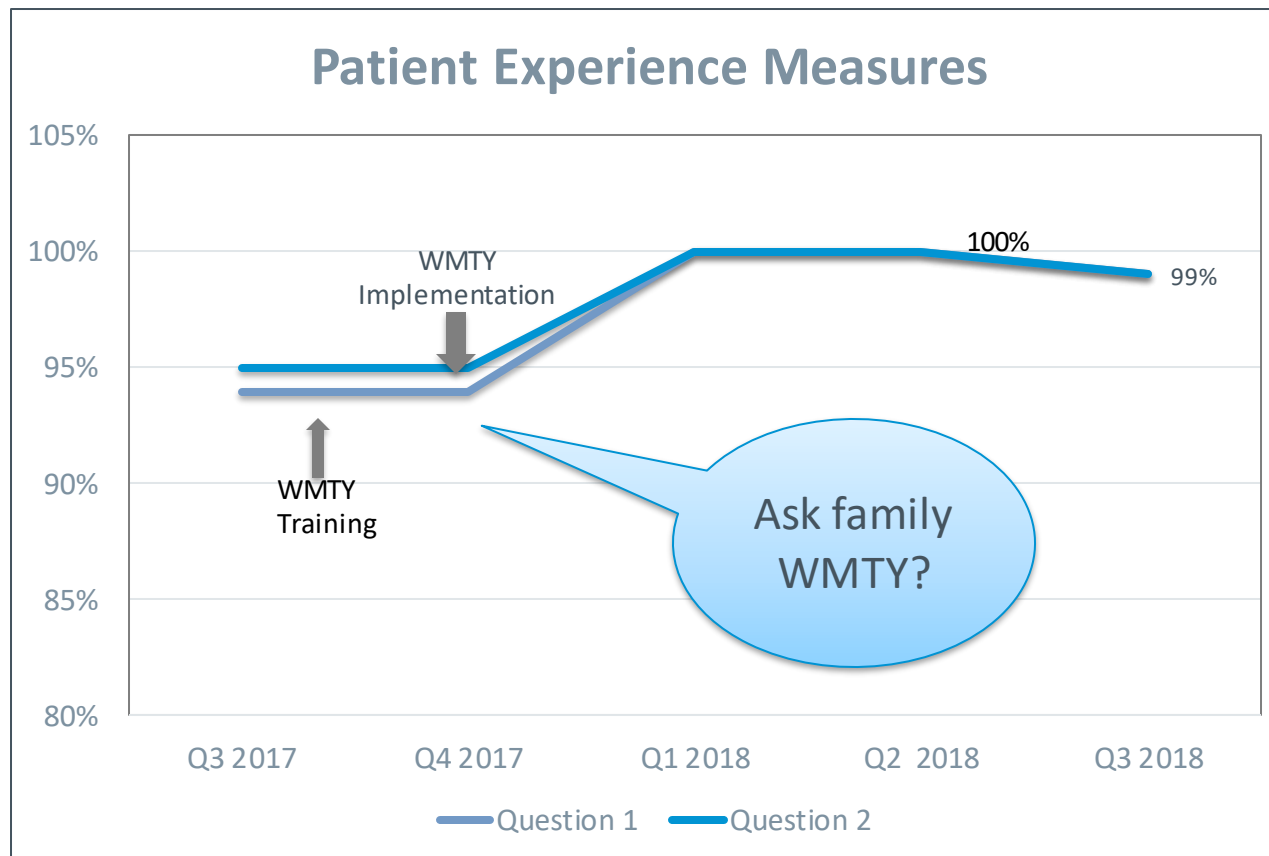


Skilled Nursing Facility: Listening & Doing What Matters at Cabrini



*What mattered was. . .
maintaining the tradition of celebrating their
anniversary like they had for the previous 54 years.*

WMTY Impact at Cabrini Skilled Nursing Facility



	2017	Q1 2018	Q2 2018	Q3 2018
Question 1: <i>Does our service live up to your expectations?</i>	94%	100%	100%	99%
Question 2: <i>Would you recommend Cabrini of Westchester to a friend or family member?</i>	95%	100%	100%	99%

Arms Acres: Addiction Treatment Program

What Matters?



**The client's wig
mattered most!**

Ah Ha:

Staff learned that only once her concern was addressed, was she ready and able to fully engage in treatment

Hospital Leadership Executive Rounds: Changing Group Dynamics at St. Luke's



*“Asking my leadership team “What matters to you?” **changed the dynamics of our executive leadership meeting. . . .less focus on barriers, more on prioritized solutioning”***

Impacting PX Metrics

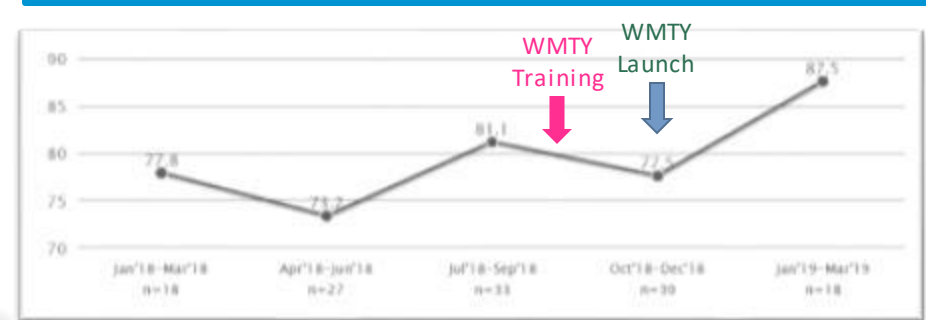
WMTY Implementation: Med/Surg Oncology Unit



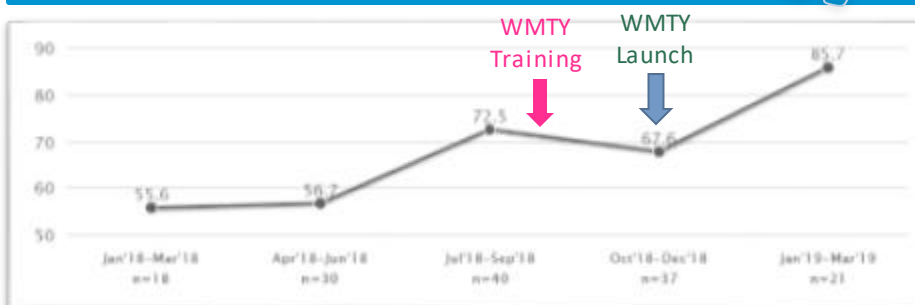
CAHPS- Hosp Staff took preference into account



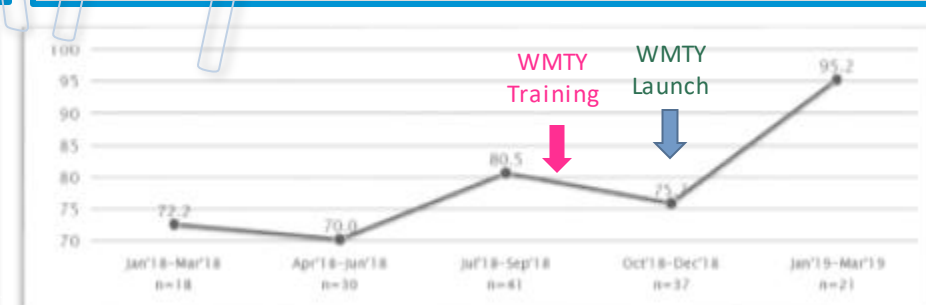
CAHPS- Hosp Staff addressed emotional needs



CAHPS- Nurses listen carefully to you



CAHPS- Doctors Treat with courtesy/respect



WMTY Training – September / October 2018

WMTY Formal Launch on Med/Surg Oncology Unit –Jan 1, 2019

Building Momentum: Sizzle Reels: Stories of Impact



Avi Silber, MD
Chief Medical Officer
Cornerstone Family Healthcare

<https://vimeo.com/251849220>

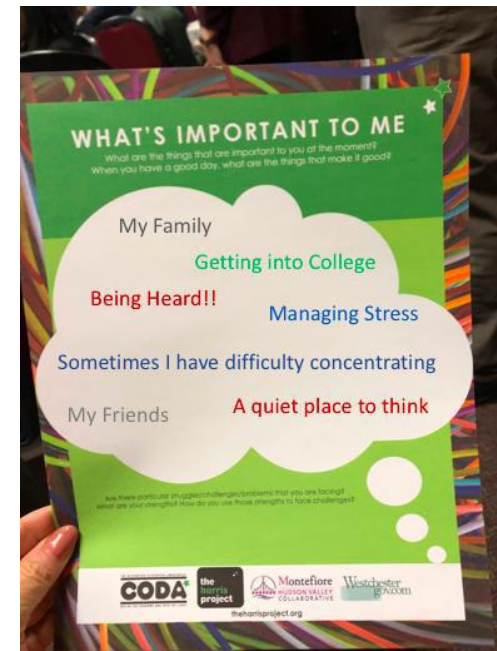
#JOYMHVC #IHIFORUM @DrDamara1 @schaffer09



Special Interest Groups



Tool to guide student peer conversations about CODA (Co-occurring Disorders)



Montefiore LGBTQ Alliance
<https://vimeo.com/259941956>

“What do you think matters most to the people you care for?”

For Providers

“What do YOU think matters to the people you care for?”

For Patients/Family

“What matters MOST for you related to your healthcare or your loved one’s healthcare?”



PLEASE SCAN THE
BARCODE & ANSWER



#JOYMHVC #IHIFORUM @DrDamara1 @schaffer09



WMTY Toolkit & Resources



MHVC WMTY Toolkit

Online access to videos, stories, a training module & curated WMTY implementation resources

Institute of Healthcare Improvement



Scotland & British Columbia



Implementation Toolkits & Stories of Impact

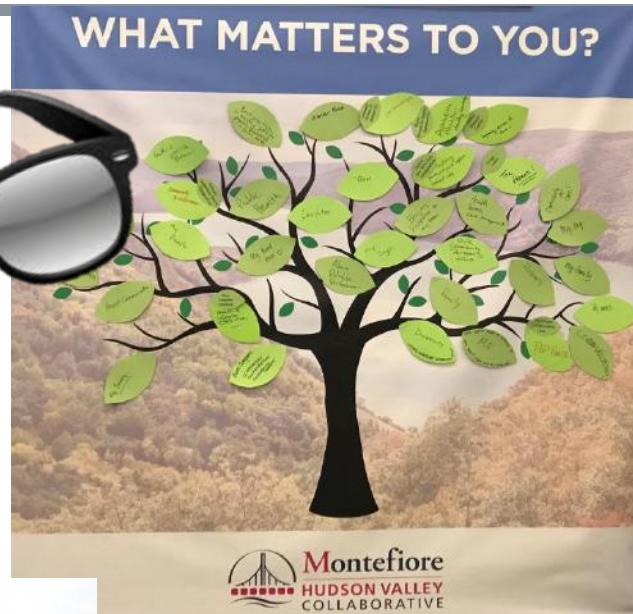


<http://montefiorehvc.org/>

#JOYMHVC #IHIFORUM @DrDamara1 @schaffero9



Spreading WMTY and Making Connections



#JOYMHVC #IHIFORUM @DrDamara1 @schaffero9

Are you willing to make a commitment?



TWEET Your
Commitment Photo





Spreading
WMTY
Nationally

WMTY in Denmark

- Hosted by Danish society for Patient Safety PS! a NGO not for profit organisation
- Founded by the Tryg Foundation 2016-2018



Hvad er vigtigt for dig?

Spørg hvad der er vigtigt
Lyt til hvad der er vigtigt
Gør hvad der er vigtigt

Den 6. juli opfordres alle sundhedsprofes-
sionelle til at tage en "Hvad er vigtigt for
dig"- samtale med deres patienter.
Enkle spørgsmål kan give dig en bedre indsig-
t i patientens liv, så du kan de støtten i et
sammenhæng som det giver mest mening for dem,
altså hvad der er vigtigt for dem.

Her gennemgår "Hvad er vigtigt for dig"
i enkle trin på fem minutter:
1. Vil du gerne vide mere om patientens
liv? Udfør en god dag, hvad der er vigtigt for
dem?
2. Vil du gerne vide mere om patientens
liv? Udfør en god dag, hvad der er vigtigt for
dem?
3. Vil du gerne vide mere om patientens
liv? Udfør en god dag, hvad der er vigtigt for
dem?
4. Vil du gerne vide mere om patientens
liv? Udfør en god dag, hvad der er vigtigt for
dem?
5. Vil du gerne vide mere om patientens
liv? Udfør en god dag, hvad der er vigtigt for
dem?

HEJ HJEMME
TrykFonden
PSI
REGION SØNDLAND

Hvad er vigtigt for dig?

Det er mest tryk for mig
at få min medicin på den
måde, jeg plejer at få
den derhjemme"

"Jeg vil meget gerne
have, at min datter er
med, når jeg skal tale
med lægen"

"Jeg har brug for at komme
udenfor ind i mellem.
Det hjælper på humøret,
når det hele er så svært"

Tag snakken om hvad der betyder mest. Det giver personalet
en bedre indsigt i patienternes liv, så vi sammen kan finde
den bedste vej frem.

HEJ HJEMME
TrykFonden
PSI
REGION SØNDLAND



Support from stakeholders

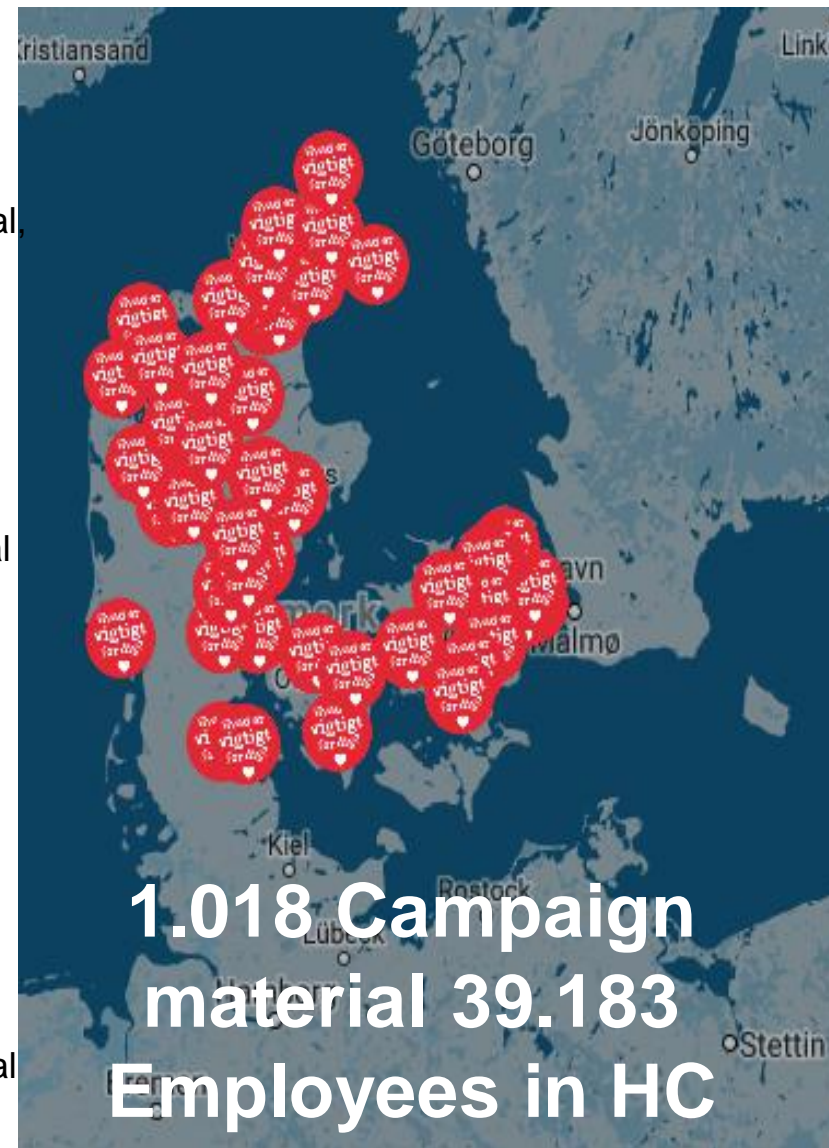


Campaign material free of charge



Hvad er vigtigt for dig?—dagen 2018

- Aalborg Universitetshospital
- Holbæk Kommune
- Hospitalsenheden Vest
- Regionspsykiatrien Midt
- Regionshospital Nordjylland
- Regionshospitalet Randers
- Omsorgscenter Solgården
- Regionshospitalet Holstebro
- Odense Rygklinik
- Roskilde kommune
- Syddjurs Kommune
- Køge Universitetshospital
- Frederikssund Kommune
- Næstved Sygehus
- Ikast-Brande Kommune
- Slagelse Sygehus
- OUH Svendborg Sygehus
- Kiropraktoren Hammel
- Regionshospitalet Horsens
- Aabenraa Sygehus
- Odense Universitetshospital
- Sygehus Sønderjylland
- Aarhus Universitetshospital
- Favrskov Kommune
- Sygehus Lillebælt
- Amager Hospital
- Frederiksberg Hospital
- Regionshospitalet Viborg
- Sønderborg Sygehus
- Sjællands Universitetshospital
- Roskilde
- Sportsværkstedet Kolding
- Hospitalsenheden Midt
- Nord-KAP
- Hvidovre Hospital
- Hedensted Kommune
- Rehabiliteringscenter Grøndal
- Københavns Kommune
- Rigshospitalet/Glostrup
- Aabybro Kiropraktisk Klinik
- Vejgaard Kiropraktisk Klinik
- Sydvestjysk Sygehus
- Regionshospitalet Skive
- Kolding Kommune
- Hillerød Hospital
- Rigshospitalet
- Holbæk Sygehus
- Sjællands Universitetshospital
- AUH Skejby
- Næstved Sygehus
- **Og mange flere!**



Dansk Selskab for PatientSikkerhed **PS!**

TrygFonden

Experience shared

Spørg hvad der er vigtigt
Lyt til hvad der er vigtigt
Gør hvad der er vigtigt

6. juni 2017
vigtigtfordig.dk

Topics in the mind map:

- Vil bare gerne udskrives til egen bolig og have mere kontakt med
- Tillid
- Blomster på spisebordet giver miljø. Aftaler skal overholdes (S3)
- Vigtigt at have kontaktperson n. besøg af familien
- Sindsro
- Refleksion
- Glæde
- At man kan få sin medicin, så man ikke det dårligt, socialt samvær, lave noget godt kan lide, god dagsrytme: Stå op, få morgenkaffe, ryge, gør toilet morgenmad, morgenmedicin, have gøremål, 4 x om ugen arbejde i gartneri. Kan man ønske en kost og fejebakke rygegården? Vigtigt man fortæller om sin sygdom/hvordan man har det (S2)
- At blive selvhjælpen
- Dejligt i aktivitet patient være m
- Få noget god mad, kan man få dessert? Træning hos fys./ergo
- Ærlighed
- Eget ansvar for mestring af min sygdom (psykisk) Min familie og mine venner Min krop (helbred) - vægttab
- At få fortalt, at "du ikke skal være bange og at du bliver rask igen". Fred og ro, og at i er gode at snakke med (S3)
- Flow-tilstanden - Respekt for andre og for mig selv...
- At få ro i hovedet At komme i Centerterapien og nogle værker Tilhørsforhold Min hund er også meget vigtig skal ikke se den i mange dage.
- Lettere og den gode samtale
- Jeg har en glæde ved at komme i Centerterapien. Jeg bliver inspireret og det er dejligt at komme ud
- Blive fyldt energi, hvilke person
- Roer, det at kunne trække sig ved behov, at tiderne og aftaler bliver overholdt (sker ikke)
- Jeg kan godt lide at sidde og lytte til, hvad andre har at fortælle

Den 6. juni er det Hvad er vigtigt for dig?-dag.

Over hele verden vil personalet spørge ind til borgernes behov, ønsker og håb.

- motion

Hvad er vigtigt for DIG? Hvad vil DU svare?

-ægteskab - Seks

- motion

- God mad

TrykFonden

PS! Dansk Selskab for PatientSIkkerhed



WMTY – every day at Skovcentret



WMTY – every day at Skovcentret

Jeg kan godt lide at sove længe.
Jeg vil gerne have besked i god tid hvis jeg skal noget – så bliver jeg glad.

Hvad betyder noget for MIG?



Jeg kan godt lide TV programmer om dyr og natur

Det er vigtigt for mig at komme til øjenlæge og ørelæge

Jeg er kærlig og åben
Jeg har 7 søskende, 4 drenge og 3 piger.
Mine kæledyr – en kat og en hund

Jeg kan godt lide toastbrød med gammel/stærk ost og kakaomælk til morgenmad.
Til frokost: Bondebrød % spegepølse og % varm mad

Min drøm er at vinde i Lotto





Value Based Care - WMTY as a principle Capital Region



Værdibaseret styring 2019

1 Individuelt tilpasset behandling med øget patientinddragelse

FORSLAG TIL PRINCIPPER

- Patientens situation skal styre forløbet.
- Patientens situation skal styre forløbet, så patienten oplever at blive spurgt: "Hvad er vigtigt for dig?" Og patientens svar skal anvendes i tilrettelæggelsen af behandlingen.
- Patienten skal i større omfang inddrages i sin egen behandling, hvis patienten ønsker det.
- Patienten skal opleve at blive styrket i sin håndtering af egen sygdom og behandling.
- Hospitalerne skal fortsætte med at udvikle og afprøve brugen af patientrapporteret outcome (PRO) som en metode til at opnå viden om, hvilken værdi behandlingen har for den enkelte patient.

MULIGE DILEMMAER

- Patientens ønske vs. faglige kvalitetsstandarder.
- Patientens behov for tryk ved hjælp af faste kontrollider hos fast læge vs. "systemets" tilbud om behovsbestemte kontroller hos et team af læger.
- Patientens behov for fysisk fremmøde hos læge vs. "systemets" ønske om øget digitalisering af kontakt, fx via telefon eller e-mail/Min SP.
- Lokale/individuelle tilbud/løsninger vs. centrale, politisk bestemte løsninger.
- Styring efter værdi for patienten (dvs. subjektive mål, der afhænger af patientens og personalets adfærd) vs. styring efter objektive/generiske mål.

Next step in Denmark



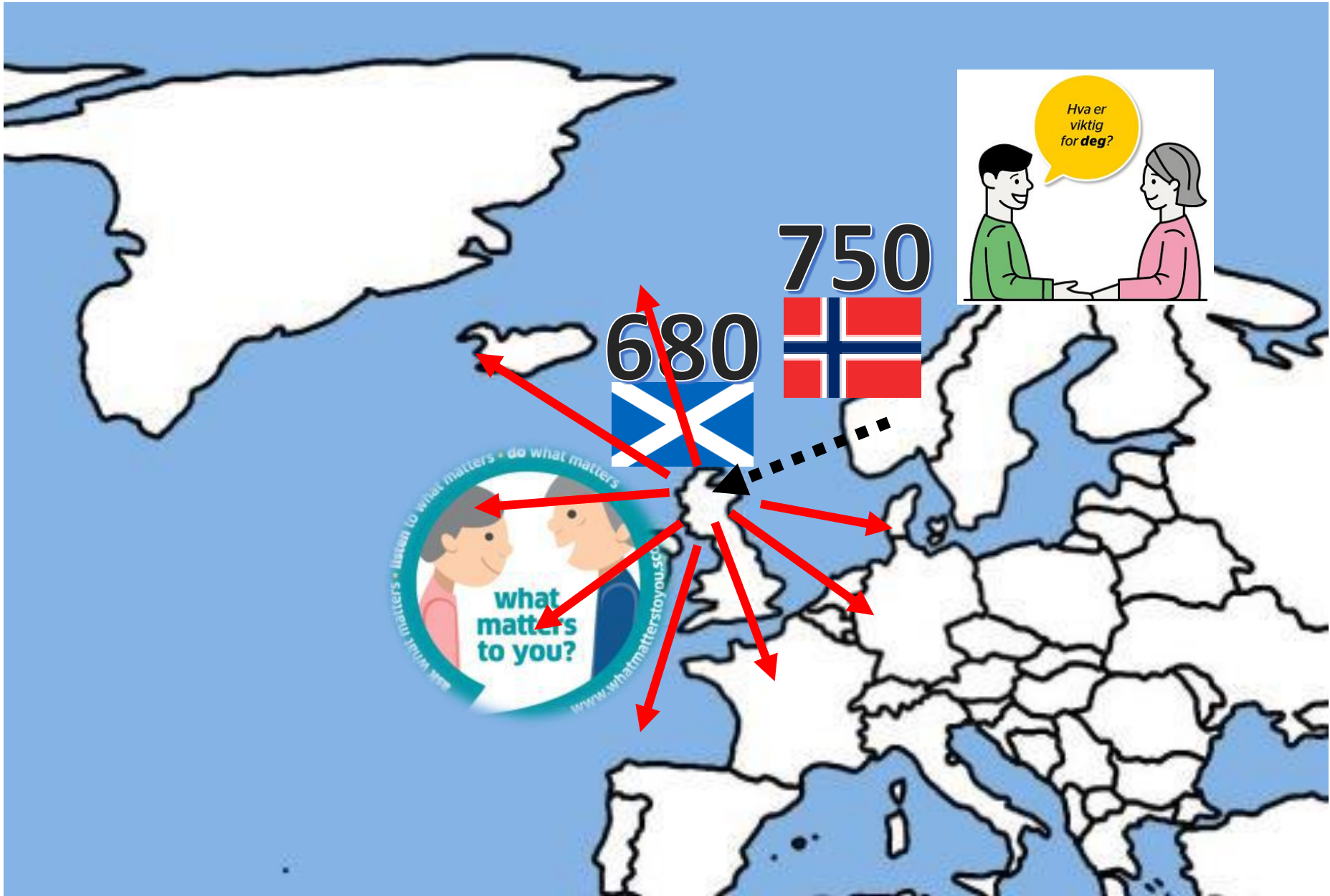


Spreading
WMTY
Globally

*Hva er
viktig
for **deg**?*



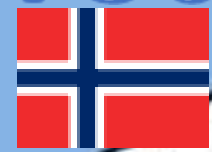
Why the movement
has spread...

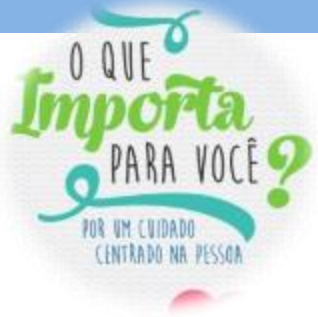


680



750





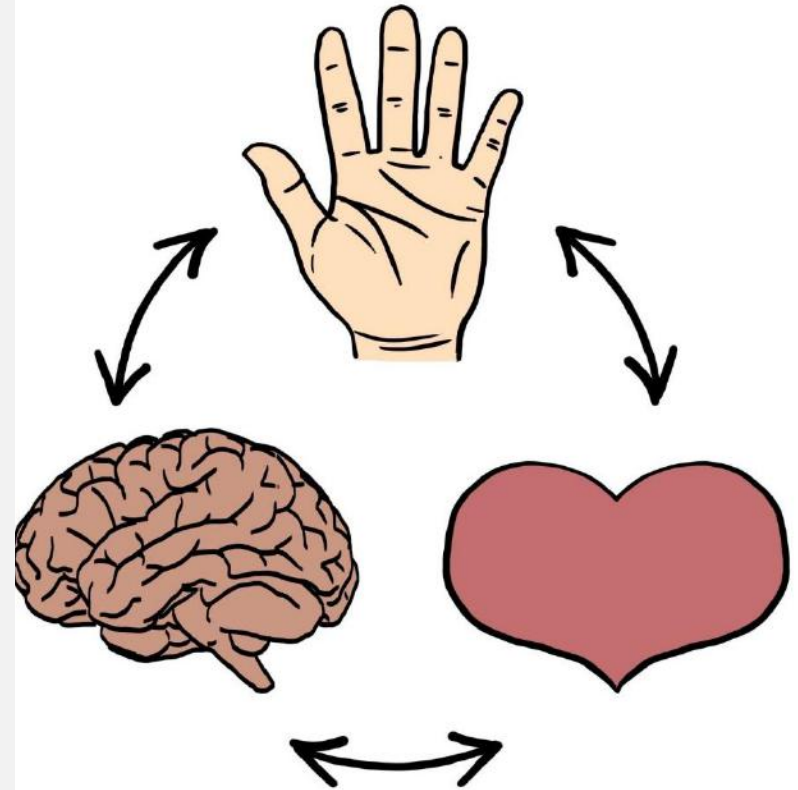
31 Countries
2000+ teams



Connecting heart, head & hands

Heart

- **Building human will through the power of story telling**
- **Connecting with values**
- **Awakening the emotional being**

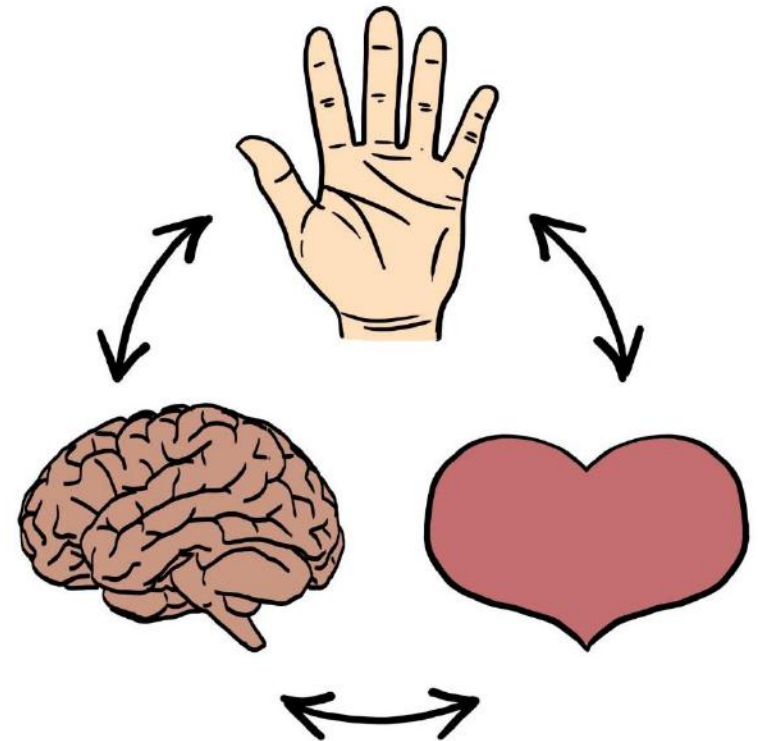


Connecting heart, head & hands

Head

Strategising:

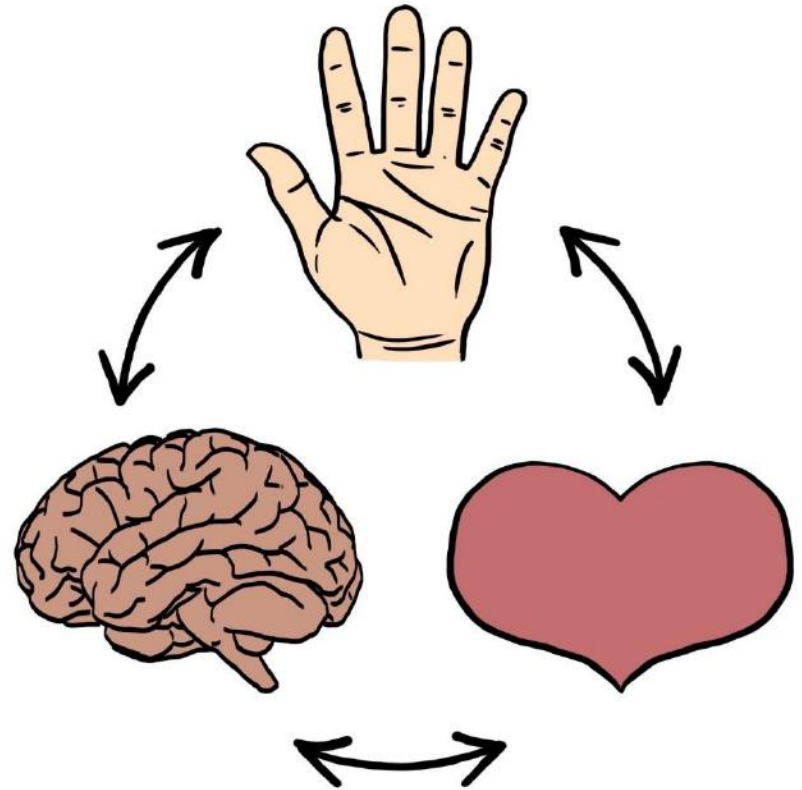
- Impact on outcomes *and* performance
- Identify key networks
- Identify key hierarchies
- Aligning with strategic and political imperatives



Connecting heart, head & hands

Hands

- How things **could be**, how things **should be**...
- Generating will to **action**...
- What I can do **now**...



Heart... Head... Hands...

- Focus on *the essence*
- Keep rules of participation *ambiguous* and *open* to interpretation
- Harness the power of the *network* and the *hierarchy*
- Strategic use of *story-telling*
- *Follow the energy.* Enthusiastically welcome all-comers - the people who come are the right people!

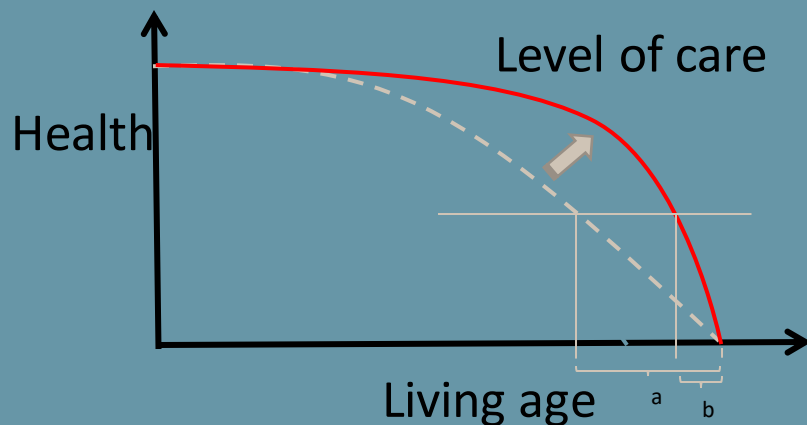


Embedding WMTY Systematically



Years to **life** – or **life** to years?

Years to life –or life to years?



Spijker J, MacInnes J. Population ageing: the timebomb that isn't? [BMJ 2013](#)

[2013-11-12 23:30:47;347](#)

Every system is perfectly
designed to give exactly the
results it gives.

Paul Batalden

Mind-shift

Pathway today

Structure(org.)
Processes

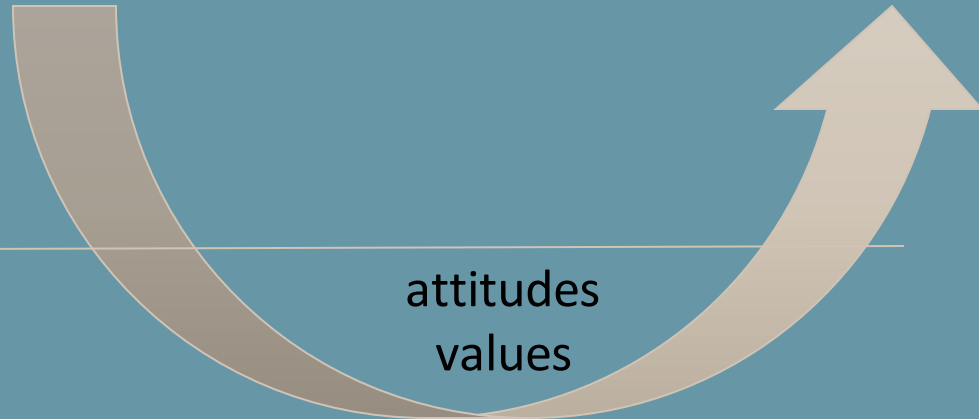
Pathway tomorrow

Structure(org.)
Processes

attitudes
values

"What's the matter?"

"What matters to you?"



Building on a successful pilot



Norwegian Institute of Public Health

Rosstad T, Garasen H, Steinsbekk A, Sletvold O, Grimsmo A. Development of a patient-centred care pathway across healthcare providers: a qualitative study. BMC Health Serv Res. 2013;13:121

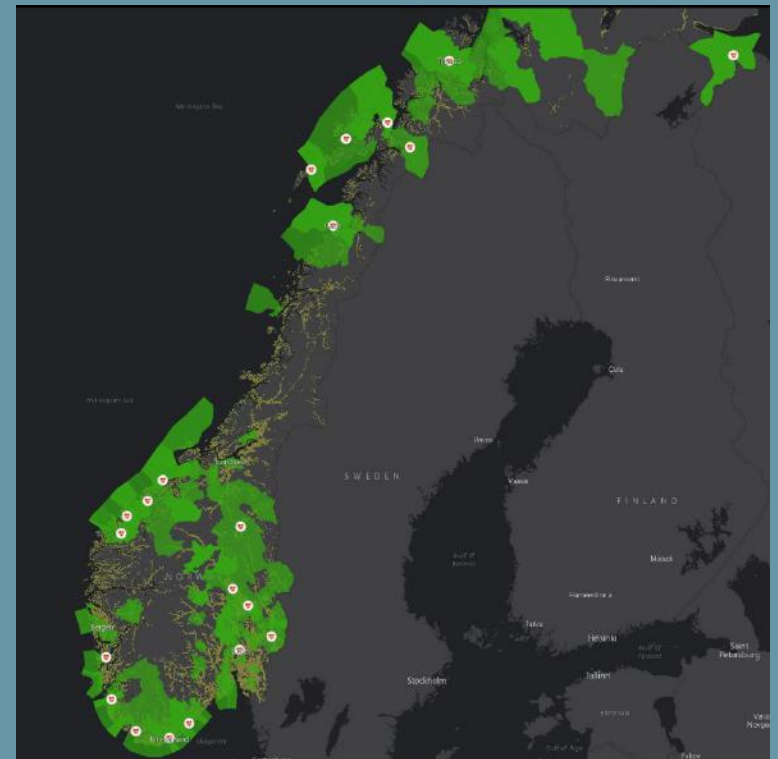
Røsstad T, Garåsen H, Steinsbekk A, Håland E, Kristoffersen L, Grimsmo A. Implementing a care pathway for elderly patients, a comparative qualitative process evaluation in primary care. BMC Health Services Research. 2015;15:86

Røsstad T, Salvesen Ø, Steinsbekk A, Grimsmo A, Sletvold O, Garåsen H. Generic care pathway for elderly patients in need of home care services after discharge from hospital: a cluster randomised controlled trial. BMC Health Services Research. 2017;17(1):275

Grimsmo A, Løhre A, Røsstad T, Gjerde I, Heiberg I, Steinsbekk A. Helhetlige pasientforløp – gjennomføring i primærhelsetjenesten. Tidsskrift for omsorgsforskning. 2016;2(2):78-87

8 Regional collaboratives

- Model framing good practice
- Each collaborativ built on local ownership and QI-culture
- Improvementteams from municipalities and hospital
- Preparation before start
- 4 times 2-days sessions in 18 months
- Coaching between sessions



Patient Trajectory for Home-dwelling elders" (PATH)

Home:
User / relatives

Homecare

Nursing
inst.elderly

Fysio-/occ.therapi

GP

Emergency
room

Service office

policlinic

Hospital

Start

0 Discharge from
specialist-
healthcare

1 Meeting with
homecare

HPH0:
checklist

2 Coordination
unite

HPH1:
checklist

4 Discharge
shortstay or
rehabilitation

3 Visit by
homecare -
nurse

HPH2:
checklist

HPH3:
checklist

5 Visit GP and
medication
review

6 Evaluation after
4 weeks

HPH5:
checklist

Daily observation and services

HPH4: checklist

checklist (Trondheim)

[HPH0 – admission from hospital](#)

[HPH1- prepare homecoming](#)

[HPH2- Structured follow up by a nurse within 3 days after admission.](#)

[HPH3- prepare consultation at GP](#)

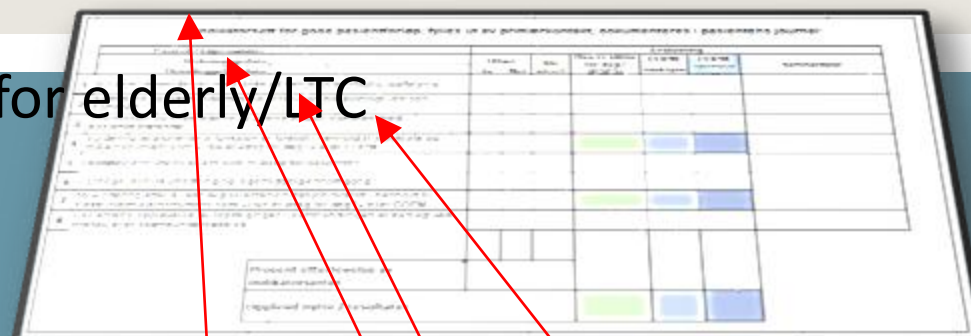
[HPH5- Four-weeks conversation and review with user](#)

[Daily services – list of tasks](#)

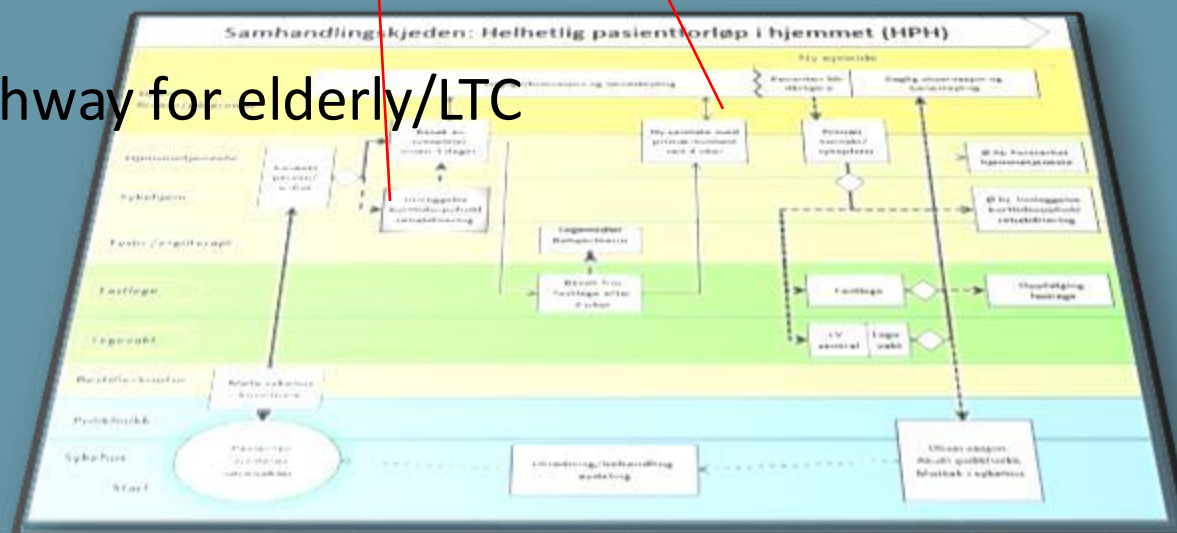
[HPH4- when health issues/drop of functioning level. \(Contact ER\)](#)

[HPH6- Information to hospital when admission](#)

Indicators for pathways for elderly/LTC



Flow chart for pathway for elderly/LTC



EPJ-nr.:		Henvendelse om vurdering fra:		<input type="checkbox"/> Vært innlagt på sykehus	<input type="checkbox"/> Vært innlagt KØH/ØHD	STATUS:		<input type="checkbox"/> Ny søker om tjenester	<input type="checkbox"/> Mottar praktisk bistand
Initialer:		<input type="checkbox"/> Fastlege	<input type="checkbox"/> Fysio. / ergo.	<input type="checkbox"/> Hjemmetjenesten		<input type="checkbox"/> Mottar hjemmesykepleie	<input type="checkbox"/> Ønsker institusjonsplass	<input type="checkbox"/> Annet	
		<input type="checkbox"/> Pasient/pårørende	<input type="checkbox"/> Annet:						

Målepunkter for det Gode pasientforløpet

		Utført			Kommentarer
		Ja	Nei	Ikke aktuelt	
1	Forberedelse av mottak				
1a	Tilstrekkelig informasjon for videre oppfølging av pasienten er mottatt / innhentet via e-link eller samtale.	x			
1b					
1c					
2					
2a					
2b					
2c					
3					
3a					
3b					
3c					
4					
4a	Sjekkliste for oppfølging og evaluering er gjennomført.	x			
4b	"Har vi lyktes med det som er viktig for deg?" - samtale er gjennomført.	x			7
4c	Andre 4 meter gangtest er gjennomført	x			1,0 m/s
4d	Oppfølging / evaluering innen 6 mnd er planlagt			x	
Prosent etterlevelse av målepunktene		92 %			
Opplevelse av endring i funksjon					4
Mål for 4 meter gangtest oppnådd?					Ja

- Prepare transitions
- What matters to you-visit within three days
- Considered by GP within two weeks
- Follow up/evaluation within five weeks
- Early sign of changed condition, what then

The Patient-Specific Functional Scale

This useful questionnaire can be used to quantify activity limitation and measure functional outcome for patients with any orthopaedic condition.

Clinician to read and fill in below: Complete at the end of the history and prior to physical examination.

Initial Assessment:

I am going to ask you to identify up to three important activities that you are unable to do or are having difficulty with as a result of your _____ problem. Today, are there any activities that you are unable to do or having difficulty with because of your _____ problem? (Clinician: show scale to patient and have the patient rate each activity).

Follow-up Assessments:

When I assessed you on (state previous assessment date), you told me that you had difficulty with (read all activities from list at a time). Today, do you still have difficulty with: (read and have patient score each item in the list)?

Patient-specific activity scoring scheme (Point to one number):

0 1 2 3 4 5 6 7 8 9 10
Unable to perform activity Able to perform activity at the same level as before injury or problem

(Date and Score)

Activity	Initial										
1.											
2.											
3.											
4.											
5.											
Additional											
Additional											

Total score = sum of the activity scores / number of activities

Minimum detectable change (90%CI) for average score = 2 points

Minimum detectable change (90%CI) for single activity score = 3 points

PSPS developed by: Stratford, P., Gill, C., Westaway, M., & Binkley, J. (1995). Assessing disability and change on individual patients: a report of a patient specific measure. *Physiotherapy Canada*, 47, 258-263.

Reproduced with the permission of the authors.

What matters to you?

Patient ID:

How difficult is it for you to perform the activity?

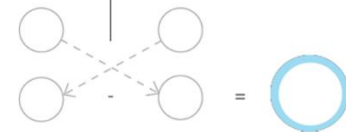
0 1 2 3 4 5 6 7 8 9 10
Unable to perform No difficulties

1. Conversation

2. Conversation

Average

Experienced improvement



What matters to you?

Patient ID: TORDIS



How difficult is it for you to perform the activity?

0 1 2 3 4 5 6 7 8 9 10
Unable to perform No difficulties

1. Conversation

2. Conversation

PUT ON THE SOCKS BY MYSELF

0

8

MAKE MY OWN BREAKFAST

2

5

MAKE MY OWN COFFEE

3

8

WALK ALONE USING MY WALKER

3

7

Average

2

7

Experienced improvement

7

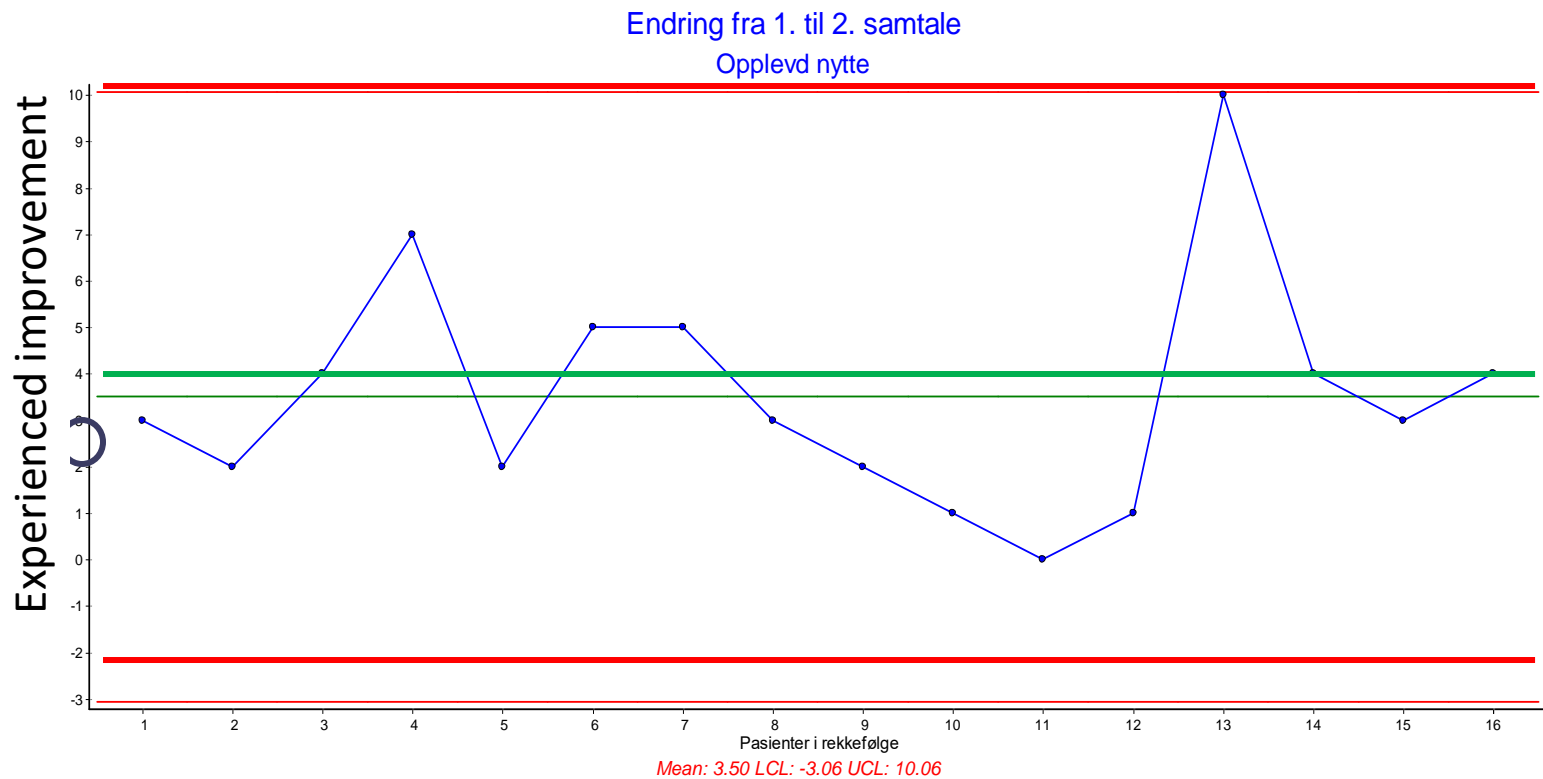
-

2

=

5

Patient Experienced Improvement «What Matters to You?»



Patients in chronological order

EpiData Analysis Graph

The goal for the Patient Experienced Improvement

Improvement

The real Patient Experienced Improvement

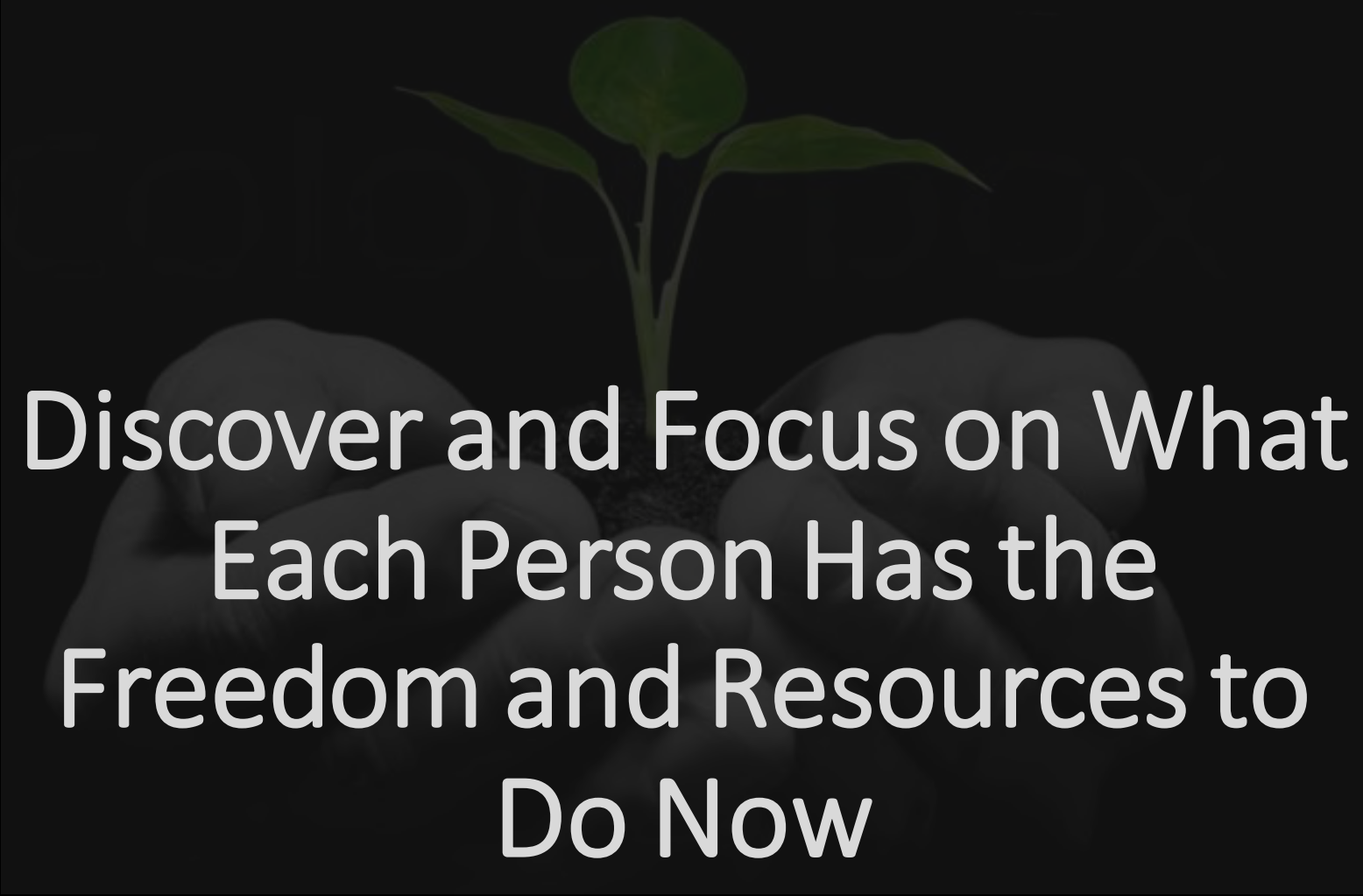
What matters when it's getting really close to me?

What matters to Ellen Vege?

NIPH
Norwegian Institute of Public Health

- Mom has 7 children, many grandchildren, and grand-grandchildren.
 - To mention the name of her children will comfort her: Ulf, Aashild, Kristin, Gunnar, Erik, Anders og Ingunn. Name everyone of them and say they love her deeply.
- **Mom has a Christian believe. You may read for her in the holy Bible. It is a mark at Psalm 23. that would be good for her.**
- You may read the Lords Prayer if you remember from Sunday shool☺ she also have a book with a collection of her own poems beside her bed.
- **Holding her hand will do her good and give her strength. To touch her hair and cheek will also be good.**
- To use lip balm and to wet her lips and mouth will comfort her.
- **Remember to use the hearing aid and make sure batteries are fresh**
- Mom has always loved music. She was a piano teacher and played the piano recently Use the loudspeaker to play some piano concert at Spotify
 - She loved piano concerts of Edward Grieg
 - Amazing grace was a hymn she always came back to and loved.

15% Solutions



Discover and Focus on What
Each Person Has the
Freedom and Resources to
Do Now

15% Solutions

Where do you have discretion and freedom to act?

What can you do without more resources or authority?

1. **Alone**, create a list (4 mins)
2. **Share** in small groups of 3 or 4 (2 mins each)
3. **Questions & clarifications** general group discuss (8 mins)
4. **Alone** identify your **top three** actions to take away from the process (1 min)

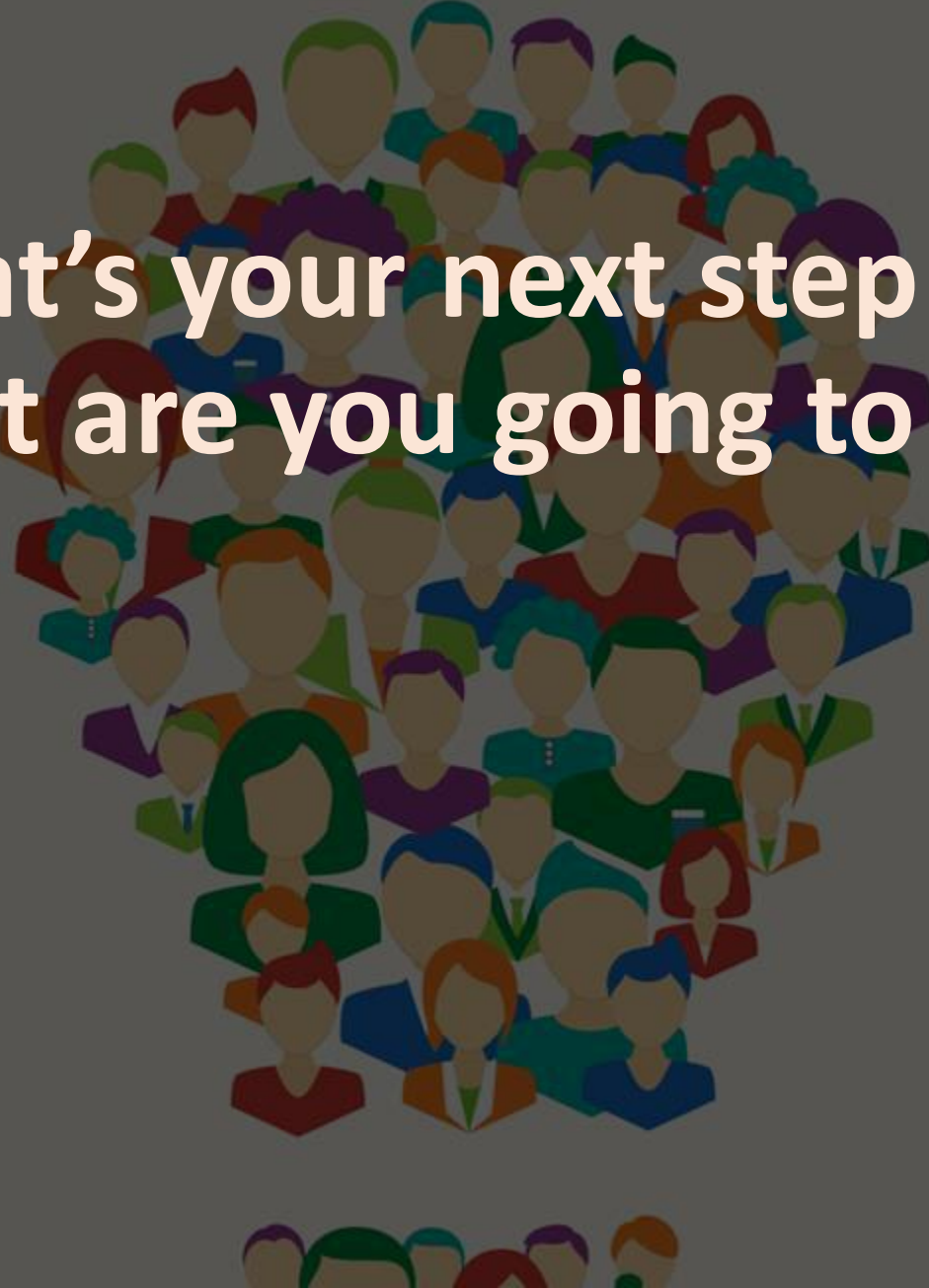


Sharing our learning & ideas

Crowdsourcing
25/10

After our discussions today...

**1. What's your next step –
what are you going to do?**



After our discussions today...

1. What's your next step – what will you do?

- Write on a post-it note
- When the music starts move around the room passing your post-its to each other
- When the music stops look at the post-it in your hand and give it a score from 1 (low) to 5 (high)
- When the music starts again... repeat the process.