

Respect | Manaaki

We respect, nurture and care for each other

Every month, hundreds of inpatients respond to our Outpatient Experience survey. To understand how these patients see our values in practice, we analysed over 13,000 patient comments made in the 12 months to August 2017. Of these, we found 1040 comments which illustrated behaviours congruent with our values around respect, and 867 comments about behaviours we don't want to see (note that more than 700 of these were about taking patients' time for granted). This report is a summary of these behaviours.

Listen to different points of view

n=373

TREAT PATIENTS AS PARTNERS IN THEIR CARE AND TREATMENT

Our outpatients say we listen to different points of view when we partner with them, listening to their experience and respecting their expertise, while offering our expertise, and providing options they may not know of or have not considered.



"The doctor went away and discussed with the team and then explained the whole range of options available. She included my opinions as being relevant and didn't put any pressure on me to accept a plan one way or another. It was a really powerful experience and the team needs to be congratulated."

86%

OF OUTPATIENTS SAY THAT THEIR VIEWS WERE **ALWAYS** TAKEN INTO ACCOUNT AND RESPECTED

n=8148

86% OF OUTPATIENTS SAY THEY WERE **ALWAYS** LISTENED TO BY DOCTORS AND DENTISTS.



n=6045

88% OF OUTPATIENTS SAY THAT NURSES AND MIDWIVES **ALWAYS** LISTENED TO WHAT THEY HAD TO SAY.

n=1745



LISTEN AND DISCUSS WITHOUT JUDGEMENT

Patients appreciate it when we discuss options with them and respect the choices they make. They particularly like it when we listen without judgement to their point of view. Those with religious and cultural beliefs appreciate it when we discuss options that take these into account.

83%

OF OUTPATIENTS SAY THAT OTHER STAFF **ALWAYS** LISTENED TO WHAT THEY HAD TO SAY



n=1657

Show compassion

n=582

BE KIND

Our outpatients appreciate it when we show kindness and caring towards them. We do this through being warm, friendly, listening closely and taking time to understand their situation. It makes them feel that staff are genuinely concerned about them, building confidence and trust and putting patients at ease.



"It was a great relief to be 'heard' and responded to with genuine care and concern. I felt the doctor and the nurse primarily involved in my care were not just going through the motions of a procedure, they really cared about my health and wellbeing."

REASSURE

Providing reassurance that we are competent and skilled, that we understand their concerns and worries and will do our best to reduce and mitigate risks or poor outcomes is much appreciated by our outpatients. Patients want to know they are getting top quality care and treatment. They feel reassured in our competence when we provide clear and timely information about treatment options, risks and what might happen to mitigate the risks.

"Staff comforted me when I felt pain - keeping my hand - making me feel like somebody was taking care of me at 100% of their ability..."

SHOW EMPATHY

Our outpatients tell us that empathy is when we show that we understand that what they are facing is scary, painful, upsetting or challenging, and using words, touch or gesture to reassure them. It also involves making sure that every attempt is made to reduce pain or discomfort.

GIVE PEOPLE TIME AND A PRIVATE SPACE

Patients tell us they feel as though their privacy is respected when they are given time, a private area in which to change and an opportunity to cover up. They particularly appreciate it when staff pull curtains or undertake the consultation in a private room, and make sure they are covered as much as possible during the examination.



"A curtain was always pulled when undressing and a gown was always available. It was good to be told where to leave the gown open i.e. at the front for my heart. The young man never made me feel uncomfortable or vulnerable which I really appreciated."

BE PROFESSIONAL AND DISCREET

Patients appreciate it when we put people at ease, and carry out examinations respectfully, understanding that patients are vulnerable. Our patients tell us we protect their privacy when we undertake conversations in a manner that cannot be overheard.

95% OF OUTPATIENTS SAY THEIR PRIVACY WAS ALWAYS RESPECTED DURING THEIR CONSULTATION.

n=7647

94% OF OUTPATIENTS SAY THEIR PRIVACY WAS ALWAYS RESPECTED DURING THEIR EXAMINATION.

n=8057

85% OF OUTPATIENTS SAY THEIR PRIVACY AT RECEPTION WAS ALWAYS RESPECTED.



n=7926

"I was advised of areas I could change in private and was given options on what to wear to cover up. Even when I was on the examination table I was quickly covered up."

TAKE TIME TO PUT THE PERSON AT EASE

Our patients appreciate it when staff introduce themselves and their role, prior to undertaking a physical examination. They ask that we tell them what will happen and *then* ask permission to touch them.



WE CHECK BEFORE INVOLVING OTHERS

Gaining permission before staff training or when there are additional staff in the room, particularly during examinations or procedures, is both courteous and makes our patients feel respected.

"[...] went in to have [a procedure]. The junior doctor was available and as it was a delicate procedure she at once got in touch with the senior doctor in charge. After he performed the procedure a couple of times he guided her to do the last procedure. The amazing aspect was he asked my permission before he allowed her to perform the procedure which to me was real professional. Hats off to both of them."

We don't show Respect | Manaaki by...*

TAKING OUR OUTPATIENTS' TIME FOR GRANTED

Our outpatients feel as though their time is taken for granted when they receive an appointment and are not told what the appointment is for, or they believe matters could be dealt with over the phone or by letter. They feel frustrated when they wait months for an appointment, and staff do not take time to listen or address their questions and concerns, or they are too junior to make diagnoses or treatment plans. Patients consider it rude to be kept waiting after the scheduled time without an explanation or an apology, particularly when they work, have childcare commitments, or have to pay for parking. They do not know if they have been forgotten (and some had) or if there is a reason for the delay.



n=743

"I waited over 6 months for this appointment and saw the [doctor] for about 3 minutes or less. Consultation- well there wasn't any. His very first words were reading my chart, not looking at me: "well there's not a lot we can do for you". Very disappointed to not be talked to properly. He did not ask me if I had any questions. Just walked away out of the room."

"[The staff member] was blunt to the point of rudeness I did not have the confidence to ask questions. I understand he was overworked but I felt like part of a machine."

"[The staff member] was very rude, patronising and dismissive to the point I was in tears - so not a very successful appointment."

RUDENESS OR TALKING DOWN

Our outpatients tell us that they find it unprofessional and intimidating when we speak to them in a way which is rude, blunt or grumpy, particularly when they are feeling vulnerable. They feel unable to ask questions or share important information when snapped at or treated with rudeness. Moreover, they do not like it when staff behave in a manner which is condescending, dismissive or patronising. They find this deeply disrespectful and upsetting.



n=90

BULLYING OR BELITTLING BEHAVIOUR

Our outpatients tell us that they feel bullied when we do not listen to their point of view, put them down and do not respect the choices they have made.

n=24

"The [staff member] I saw was irritated by my questions; stating he had other people to see and I was asking too many questions. I felt belittled by his comments and didn't feel I could clarify his comments to my satisfaction after that statement."

DISREGARDING CULTURAL DIFFERENCES

Outpatients feel we disregard their culture when their cultural needs are not asked about or acknowledged, or are

dismissed, seen as unimportant, or over-ridden.

n=10

***A NOTE ON BEHAVIOURS WE DON'T WANT TO SEE:** It should be noted that many of the comments around behaviours that do not make outpatients feel respected refer to the behaviour of one or two individual staff members, rather than a team or organisational culture. These isolated negative experiences, however, appear to overshadow or otherwise negatively define an overall positive experience, and for this reason it is important to draw attention to them.

How are we doing overall?

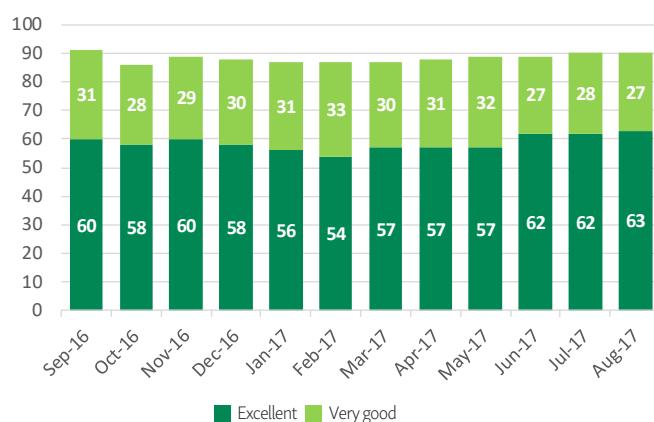
OVERALL RESULTS

Our "very good" and "excellent" ratings reached 90% in July and August this year, for the first time since September 2016.

HOW DO WE RATE? (SEP 2016- AUG 2017)

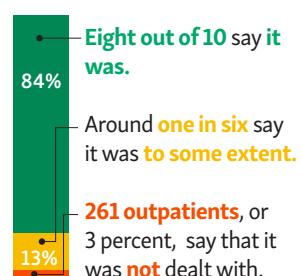


VERY GOOD AND EXCELLENT RATINGS SEP 2016 - AUG 2017



MAIN REASON MET?

We ask our outpatients if the main reason they went to the clinic was dealt with to their satisfaction



DIMENSIONS

Our outpatients are asked to choose the three things that matter most to their care and treatment, and then rate our performance on those dimensions.

