

# Welcome | Haere Mai

This month's report looks at the first of our values:  
Haere Mai | Welcome.

Overall, our patients tell us that we are putting our values into practice every day. Of the 2087 respondents over the last 12 months who commented on behaviours that reflect our values, 84 percent experienced behaviours we want to see, and 16 percent told us about behaviours that are not consistent with our values. This report considers from inpatients' perspectives what our values look like in practice.

## Six actions and behaviours our inpatients say put them at ease

# 1

### A WARM GREETING

Our inpatients tell us that a warm greeting with a smile helps to put them at ease. They say it makes them feel more comfortable and less anxious.

SMILING RELEASES NEUROPEPTIDES THAT HELP TO FIGHT OFF STRESS IN BOTH THE SMILER, AND THE PERSON WHO IS SMILED AT.



*The nurse at the reception was extremely friendly, very patient and with a light smile all the time ... I felt calmed down, welcomed and safe in good hands from my first steps there.*

# 87%

OF INPATIENTS SAY THAT THEY GOT **THE RIGHT AMOUNT** OF INFORMATION ABOUT THEIR CONDITION OR TREATMENT.

# 90%

OF EMERGENCY DEPARTMENT PATIENTS SAY THEY GOT **THE RIGHT AMOUNT** OF INFORMATION WHILST IN ED.

# 2

### EXPLAIN AND INFORM

Understanding what is happening next, how and, most importantly, when is important to our inpatients feeling at ease in hospital.

# 3

### SHOW COMPASSION

Inpatients tell us they feel most at ease when clinical staff behave in ways which are both professional and compassionate.

NON-VERBAL COMMUNICATION OF COMPASSION DIRECTLY AFFECTS PATIENTS' AUTONOMIC NERVOUS SYSTEM, BREATHING, HEART RATE VARIATION (HRV) REDUCES STRESS AND INCREASES PEACEFULNESS.

(<http://heartsinhealthcare.com>)



# 76%

OF INPATIENTS SAY THAT STAFF **ALWAYS** ANSWERED THEIR QUESTIONS IN WAYS THAT WERE EASY TO UNDERSTAND.

# 4

### ANSWER QUESTIONS

Inpatients speak highly of staff who are knowledgeable and answer their questions openly, using language and terms that are easy to understand.

# 5

### PROVIDE REASSURANCE

Inpatients say that being reassured about their condition, care or treatment helps calm them and relieves their stress or anxiety.

# 97%

OF INPATIENTS SAY THAT THERE WAS SOMEONE ON THE HOSPITAL STAFF THEY COULD TALK TO ABOUT THEIR WORRIES OR FEARS.



*[I panicked when I was having an MRI]. The two staff stopped the procedure, came to me (one on each side) and touched my hands, made eye contact and gave me reassurance. It only took them 5 minutes, but it made all the difference and then we continued.*



*[The staff] had a very calming influence on us all, and we felt as though they understood our fears & concerns, and really were listening.*

# 6

### BE APPROACHABLE

Our inpatients tell us that when they are cared for by staff who are "approachable" or "friendly" they are more likely to feel relaxed and have confidence in their care.

## Three things inpatients say we do to find out about the person

# 1

### UNDERSTAND THEIR SITUATION

Relational care is important. Our inpatients value staff who make an effort to understand their personal needs, situation, history, worries and fears, and make allowances in their care and treatment for this.



Assistance was offered at every junction and every person was extremely understanding about each and every situation. As a result of all staff listening and making sure to understand, there was no added difficulty as a result of my disability.



**99%** OF INPATIENTS WHO HAD SUPPORT FROM WHĀNAU, FAMILY OR FRIENDS SAY THEY WERE MADE TO FEEL WELCOME.

**94%** OF INPATIENTS WHO WANTED THEIR WHĀNAU, FAMILY OR FRIENDS TO TALK TO A DOCTOR SAY THEY WERE GIVEN AN OPPORTUNITY TO DO SO.

# 2

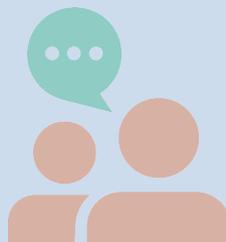
### INVOLVE SUPPORT PEOPLE

Having support people around and treated as part of the care team is valued by our inpatients and is an important part of patient-centered care.

# 3

### BUILD RAPPORT

Staff who build rapport and who appear genuinely interested are valued by our inpatients, who say behaviour like this makes them feel as though they matter.



Staff appeared very genuine when they spoke to you and whilst listening - in both conversations about the medical condition and personal chatter.

## Four things inpatients say we do to see the whole person

# 1

### LISTEN ACTIVELY

Inpatients who felt listened to said this made them "feel like a person", and that they were experiencing quality care which made them feel cared for, validated and prioritised.



EXPLAINING, LISTENING AND EMPATHISING CAN HAVE A PROFOUND EFFECT ON HEALTH OUTCOMES AS WELL AS PATIENT EXPERIENCE OF CARE.

(<http://healthcarecomm.org>)

# 90%

OF INPATIENTS WHO SAY THEY HAVE CULTURAL NEEDS RELATING TO THEIR CARE SAY THAT THESE NEEDS WERE MET.



*[I am a Muslim] ... I didn't feel any cultural and racial barriers. Even my food had a note, [because of] my surname they got me a no pork selection. I didn't even have to tell them.*

# 2

### RESPECT PREFERENCES

Inpatients with cultural, spiritual or religious needs and preferences value having these needs respected and taken into account.

# 3

### TREAT THEM AS SOMEONE WHO MATTERS

Our inpatients say they value it when we actively listen, take their opinions and preferences into account, and show them that their comfort and wellbeing is important to us.



*Teams explained things well and went to great lengths to ensure that I understood ... and patiently answered my questions and repeated where necessary. Everyone was so kind, made jokes and conversation to make me more relaxed and were professional as well. I felt human and individual and like I mattered.*

# 98%

OF INPATIENTS SAY THEY WERE TREATED WITH DIGNITY AND RESPECT WHILST IN HOSPITAL.



*Being a larger person I felt respected when the nurse said she had found a gown which i might feel more comfortable wearing. I appreciated that and she made me feel good.*

# 4

### TREAT PATIENTS WITH RESPECT

Inpatients, particularly those who feel vulnerable in hospital, value the extra lengths that some staff go to, to ensure they feel respected and have their dignity maintained.

# Four things inpatients say we do to explain the environment

# 1

## LET THEM KNOW WHAT TO EXPECT

Inpatients are reassured when they know what is happening next, where it is happening, how they will get there, who they will see etc.



Each person who came to do something explained what they were doing and who/what we might expect next.



**98%** OF INPATIENTS SAY THEIR HOSPITAL ROOM WAS CLEAN (VERY CLEAN, 72%, FAIRLY CLEAN, 26%).

**91%** OF INPATIENTS SAY THEIR TOILET OR BATHROOM WAS CLEAN (VERY CLEAN, 57%, FAIRLY CLEAN, 34%).

# 2

## HAVE A CLEAN ENVIRONMENT

Many inpatients say they value the cleanliness of the hospital environment and the efficiency of the cleaning staff.

# 3

## CLARIFY EXPECTATIONS

Inpatients value knowing what they (or their visitors) can and can't do, what they have access to or what they can ask for. Those new to the hospital environment may not have this information.



*I think you need to communicate clearly that whanau/parents are expected to stay with their children where at all possible. I wasn't sure whether I was meant to say yes or no when asked but realised later that all children did have someone staying with them.*



*I had to find a seat on level 4 while waiting for my husband to collect my medication and bring the car about. Thankfully there was a collection of different height seating available that I could use.*

# 4

## CATER TO DIFFERENT NEEDS

Inpatients value the kitchen facilities available to patients and visitors, the different heights of seating, and ample powerpoints to charge mobile devices.

# Actions and behaviours that do not make patients feel welcome\*

# 1

## UNSMILING, UNFRIENDLY STAFF

Whilst an encounter with an unsmiling, unfriendly member of staff appears to be rare, patients say when this happens it makes them feel anxious, uncomfortable and unwelcome.



*Unfortunately two staff had an unfriendly manner when they spoke to me. One nurse threw the curtains back and shouted "What?" at me when she responded to my buzzer, I was in pain and due pain relief that she had forgotten about.*

**5%**

OF INPATIENTS SAY THAT STAFF DID NOTHING TO HELP CONTROL THEIR PAIN.



*The doctor appeared busy & disinterested in the patient's pain, despite the screaming and crying of the patient and our asking for help.*

# 2

## NOT DEALING WITH PAIN

Patients do not feel valued when they are left in pain, when promised pain relief doesn't arrive or when they feel belittled or ridiculed because they are having trouble coping with their pain.

# 3

## RUDE STAFF

Inpatients feel unwelcome when they are spoken to in a rude manner or ignored. Reception areas are often noted by patients as being particularly unwelcoming.



*There were 11 people behind the counter at the reception desk and I waited at least 3 minutes for someone to even acknowledge me. One receptionist looked at me and proceeded to ignore me for another minute. When she spoke to me she was rude and abrupt and made me feel like an idiot.*

**!** I think a better understanding of mental health and training on how to relate to those under great stress is needed.

# 4

## A LACK OF UNDERSTANDING

There were many detailed instances of inpatients who felt that staff lacked understanding, or were disinterested in understanding factors, such as disabilities, other medical conditions, lifestyle, mental health needs that influenced their care and treatment, and that their care was compromised as a result.

# 5

## INADEQUATE SIGNAGE

Inpatients find it difficult to navigate the environment when there is limited or adequate signage, or maps are not provided. Two people, however, did note that signage has improved recently.



I struggled with finding my way around because memory problems make it difficult to remember directions, the hospital is huge and suffers from a jumbled layout as a result of numerous rebuilds, your signage is not particularly clear and YOU DON'T HAVE ANY MAPS ANYWHERE.

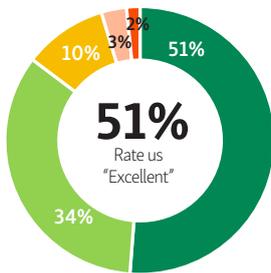
**\*A NOTE ON BEHAVIOURS WE DON'T WANT TO SEE:** It should be noted that the majority of comments around behaviours that do not make patients feel welcome refer to the behaviour of one or two individual staff members, rather than a team or organisational culture. These isolated negative experiences, 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 average very good and ratings have dropped one percent (from 86% to 85%) since the March 2017 report, however the difference is not significant.

#### HOW DO WE RATE? (JUN 2016 - MAY 2017)



■ Excellent ■ Very good ■ Good ■ Fair ■ Poor  
(n=4378)

#### OVERALL VERY GOOD AND EXCELLENT RATINGS JUN 2016 - MAY 2017



### DIMENSIONS

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

	■ Poor (0-4)	■ Moderate (5-7)	■ Very good (8-10)	% matters
Communication (clear answers I could understand)	8	17	75	51%
Confidence about the quality of care & treatment	4	10	86	46%
Getting consistent and coordinated care while in hospital	8	18	74	38%
Getting good information	8	20	72	38%
Being treated with dignity and respect	4	10	86	37%
Being involved in decisions about health and care	6	16	78	23%
Cleanliness and hygiene	8	21	72	16%
Managing pain	9	19	72	15%
Co-ordination between hospital, home & services	23	22	55	13%
Allowing whānau, family and friends to support	3	11	85	8%
Food and dietary needs	49	22	29	6%