

# Aim High | Angamua

*We aspire to excellence and the safest care.*

This month we look at the last of our values, aim high | angamua and consider what this value, which is about excellence and the safest care, means to our patients. For outpatients, it's about feeling empowered to manage their care and condition, and receiving warm, professional care within a clean environment. To help us understand more about this value, we looked at all the comments our outpatient respondents made between **February 2017 and January 2018**, selecting examples of behaviours which embody excellence and the safest care. This report is a summary of these behaviours.

## Actions and behaviours aligned with our value of "aim high"

### EMPOWER PATIENTS' DECISION-MAKING

Outpatients tell us that 'excellent' care is when they feel empowered and supported to make decisions around their care and treatment. This happens when staff explain options and risks, actively listen to the patient's questions or concerns and provide advice and recommendations whilst respecting the patient's choices and decisions.

**89%**

**NINE OUT OF 10** OUTPATIENTS SAY THEY WERE GIVEN **THE RIGHT AMOUNT OF INFORMATION** ABOUT THEIR CARE AND TREATMENT

### DELIVER PROFESSIONAL AND COMPETENT CARE

When staff are knowledgeable, skilful, confident, decisive, experienced, and dedicated our outpatients say they are confident in our care and feel safe and comfortable.



*"The doctor I saw was confident and knowledgeable. He was pleasant and welcoming, and his explanations plain and easy to understand. He was decisive and reassuring that my GP had done the right thing in referring me."*

*"My options were explained clearly and I was given choices about how I managed my conditions. This was empowering."*

**+2**

THE PERCENTAGE OF OUTPATIENTS WHO SAY THEY WERE **DEFINITELY** INVOLVED IN **DECISIONS** ABOUT THEIR CARE AND TREATMENT HAS **INCREASED** BY TWO POINTS SINCE 2014.\*

## HOW EMPOWERED ARE OUTPATIENTS TO MANAGE THEIR CARE AND CONDITION?

% OF OUTPATIENTS WHO SAY STAFF DEFINITELY TOLD THEM THESE THINGS IN WAYS THEY COULD UNDERSTAND...



**77%**

WHAT TO LOOK OUT FOR AND WHO TO CONTACT.



**86%**

MEDICATION INCLUDING WHAT IT IS FOR AND HOW TO TAKE IT.



**82%**

WHAT THEY SHOULD AND SHOULD NOT DO.



**85%**

THEIR PLAN OF CARE.

# Actions and behaviours aligned with our value of “aim high”

## DEMONSTRATE OUR SHARED HUMANITY

Our outpatients tell us that our professionalism and competence inspires confidence. They also tell us, however, that excellent care is when we engage on a level that speaks to our shared sense of humanity and which demonstrates that we care about what is going on for them. They say this starts when we introduce ourselves and communicate in a way which is welcoming and open. Most of our outpatients say that staff who dealt with them were approachable, great communicators, helpful, and caring. Some also say they appreciate it when we use well-placed, light humour to take the tension out of stressful situations.



**NINE OUT OF 10** OUTPATIENTS (92%) SAY THAT THEY WERE **ALWAYS** TREATED WITH DIGNITY AND RESPECT BY CLINIC STAFF DURING THEIR OUTPATIENT APPOINTMENT.

(Doctors / dentists 94%; Nurses / midwives 93%; Other healthcare staff 93%; Reception staff 89%).

*“Everyone I met treated me with concern for my physical and mental wellbeing. They worked in a professional manner, asking not telling, explaining carefully but not talking down to me, being careful to allow me the dignity of as much privacy as possible in the circumstances. A bit of good humour to keep the atmosphere relaxed.”*

*“This is the fourth time I have met my doctor/consultant and the establishment of the relationship makes it a lot easier to discuss current or ongoing concerns.”*

## COORDINATED CARE OVER TIME

Excellent care for some longer-term outpatients involves coordinated care over time, including building relationships between patient and the care team and growing understanding about one’s condition over time. When this is not possible however, outpatients say that they are more likely to feel safe and supported if clinical staff are attentive, helpful and accessible and ensure that good clinical notes are taken to assist others dealing with their care and treatment.

**+7**

THE PERCENTAGE OF OUTPATIENTS WHO SAY STAFF **ALWAYS SANITISED OR WASHED THEIR HANDS** BEFORE TOUCHING THEM HAS **INCREASED** BY SEVEN POINTS (79% - 86%) SINCE 2014.\*

## CLEANLINESS AND SAFETY

A clean, hygienic environment contributes to outpatients’ feelings of safety and helps relieve anxiety around hospital associated infections.

THE PERCENTAGE OF OUTPATIENTS WHO SAID THESE AREAS WERE **VERY CLEAN** HAS **INCREASED SIGNIFICANTLY** OVER THE PAST FOUR YEARS (FEB 2014- FEB 2018).

**+7**

percentage points  
(50% - 57%\*)

**BATHROOM  
/ TOILET**

**+3**

percentage points  
(80% - 83%\*)

**CLINIC ROOM**

**+6**

percentage points  
(63% - 69%\*)

**RECEPTION  
AREA**

*“The cleaner the area you are being treated in the safer you tend to feel in knowing you won't catch any diseases etc. during your time there.”*

\*The differences are statistically significant ( $p < .05$ ).

## A NOT SO EXCELLENT START

Some outpatients, particularly those who are new to our clinics, would like to remind us that the journey to get to the clinic has often been a long and stressful one. For some it's involved weeks of waiting and uncertainty, others have had to put detailed arrangements in place for work, childcare or transport. So when they finally make it to the clinic they ask that we please make eye contact, greet them warmly and help them feel as though they are in the safest and most capable hands for whatever health-related issue they are facing.

*"Twice now reception have ignored me while finishing minor tasks during a very quiet time, and then coldly told me to take a seat. Contrasted with one time when the person at reception was just for a few seconds warm and attentive, smiled, looked at me and made me feel welcome. These things are important when people are feeling nervous and vulnerable and unsure about what news they are about to be given regarding their health."*



EVERY YEAR, AROUND **3%** OF INPATIENTS TELL US THEY WERE **NOT INVOLVED IN DECISIONS ABOUT THEIR CONDITION OR TREATMENT.**

THERE HAS BEEN **NO IMPROVEMENT** ON THIS MEASURE BETWEEN FEBRUARY 2014 AND FEBRUARY 2018.

## SUPERVISION AND SAFETY

Whilst most outpatients who commented about trainee staff were more than satisfied with their treatment, a very small number told us they felt unsafe when trainee staff did not appear to be properly supervised, or if trainees were invited to observe without their permission.



*"I prefer to be given information and choices, and be empowered to discuss them rather than ... being told how things will proceed."*

*"When the house surgeon and medical student had difficulty with the separate procedures they were carrying out, I felt the supervising doctor was slow to step in. This was because he wasn't watching them. I understand that Auckland Hospital is a teaching hospital and that doctors need practice, but I felt unsafe when the procedures didn't go smoothly. How can trainee doctors get good feedback to learn from if they're not being observed by the doctor in charge?"*

## LIMITING DECISION-MAKING

A small number of outpatients did not feel they received excellent care when staff made decisions on their behalf, or restricted the patient's opportunity to make decisions about their care and treatment for themselves.

**\*A NOTE ON BEHAVIOURS WE DON'T WANT TO SEE:** It should be noted that the space in this report that is given to behaviours that do not reflect our value of aim high | angamua is disproportionate to the number of comments about these types of behaviours. These small numbers of isolated negative experiences, however, appear to overshadow or otherwise negatively define an overall positive experience.

# How are we doing overall?

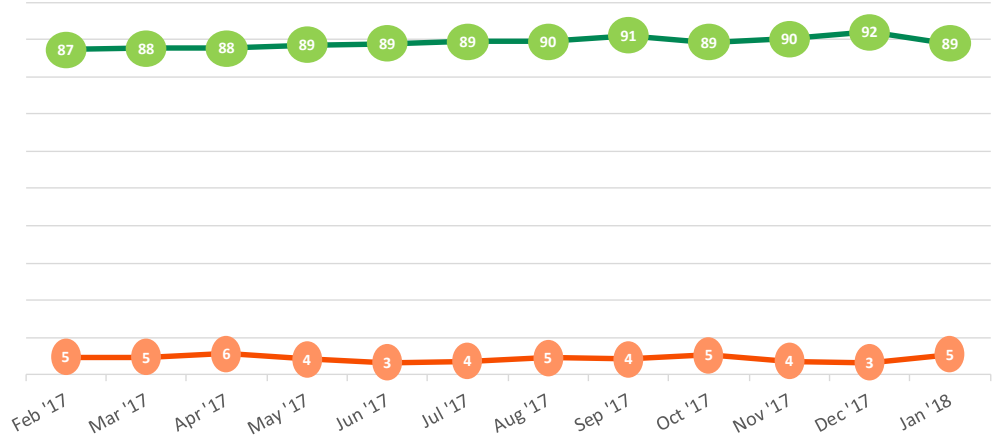
## OVERALL RESULTS

An average of 89% of respondents to the outpatient experience survey rate our care as 'excellent' or 'very good,' whilst an average of 4% say it is 'poor' or 'fair.'

### HOW DO WE RATE? (FEB 2017 - JAN 2018)



### COMBINED VERY GOOD AND EXCELLENT, AND POOR AND FAIR RATINGS, FEB 2017 - JAN 2018 (%)

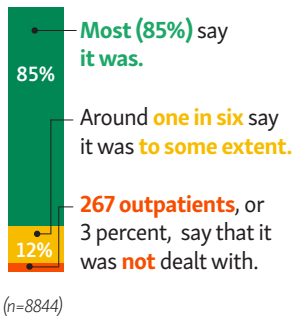


## OUTCOMES

Nearly half (48%) of outpatients who say their appointment wasn't particularly helpful say that it could have been done 'remotely', by phone, video call or email.

### MAIN REASON MET?

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

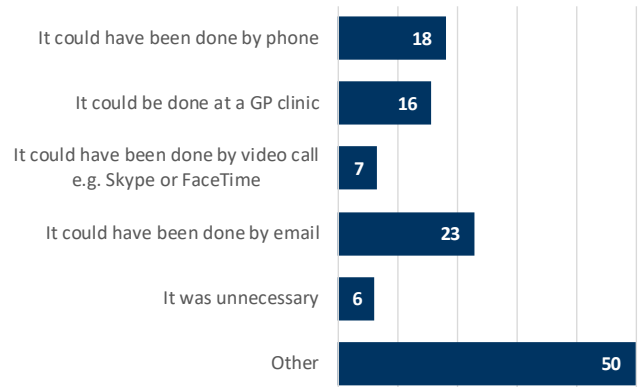


### HELPLESSNESS OF APPOINTMENT?

Outpatients are asked to rate, on a scale of 1-10 (where 1 = not at all helpful, and 10 = very helpful), how helpful or useful the appointment was to them.



### WAYS APPOINTMENT COULD HAVE BEEN MORE HELPFUL FOR OUTPATIENTS AND THEIR FAMILIES (%)



## 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.

