



## Partners in Care case study: A review of Taupo Hospital signage (by Lakes District Health Board)

A person accessing hospital services can be faced with many stressors: the gravity of a diagnosis, a looming operation or concern for a sick relative. The start of their journey through the hospital is guided by something health providers may take for granted – signage.

Taupo Hospital began a signage rebuild and upgrade in September 2013, and completion of various departments has been staggered from late 2014.

We wanted to evaluate the functionality of our new build in a way that encompassed the areas our team members come from. So, we started with the first step of the patient experience – the journey into, through and out of the hospital.

### Aim

We aimed to use the patient experience and journey to evaluate current hospital signage, and use our findings to identify improvements.

### Capture

We used four methods to capture the patient experience:

1. We developed a survey about current signage in partnership with an inpatient consumer and his family. The surveys were distributed to visitors and patients across the inpatient unit, the emergency department and outpatients.
2. We interviewed key staff who interact with consumers on a regular basis to get a picture of their experience.
3. We displayed a photo board of signage round various hospital departments. We invited consumers to share their thoughts using sticky notes.
4. Our consumer representative sat in the outpatients waiting room and, using a checklist we developed, observed the behaviour of those visiting to evaluate their journey through our services. We chose outpatients because the waiting room is at the main entrance and also outpatient consumers usually have to visit various parts of the hospital (ie, radiology or laboratory).

## **Understand**

We organised the information we captured into common themes, and framed them using emotional mapping.

The survey told us:

- some people could not see signs due to physical constraints (obstruction, small letters), and they had to ask for directions and for additional signs to assist the journey
- there were positive comments about helpful staff and the aesthetic of the new build
- some consumers could find their way through the hospital using the existing signage.

The interviews provided a snapshot of the patient journey from the perspective of receptionists in each key area, who direct and redirect patient flow. Key themes included patients ‘looking lost’, and having difficulty finding and identifying signs for each area.

The photo board sticky notes revealed mixed emotions, from consumers being lost (words such as ‘which way’, ‘daunting’, ‘absent’) to the positive support of staff (words like ‘accommodating’, ‘supportive’, ‘very helpful’).

The observation findings demonstrated similar themes to the photo board and surveys. While some consumers had to ask for directions, appeared lost or got lost, others were able to find their way.

## **Improve**

After capturing and understanding the patient experience, we undertook two ‘walk-throughs’ with consumers, using a hospital floor plan to solicit suggestions on improvements to our signage. We walked with them from the start of their journey at the carpark through to their destinations, and marked comments and suggestions about the appropriate areas. We then developed mock signs based on these suggestions to put in in the areas suggested.

Armed with this, and what we learned from the capture and understand phases, we extended invitations to key hospital staff to a session where we presented our findings and walked around the hospital through the eyes of a service user. A member of the Lakes District Health Board (DHB) signage team joined the walk-through. She displayed a genuine interest in our project and was also in the appropriate committee to advocate for progress in this area.

During the walk-through, in addition to placing new signs in the suggested areas, we used the signage team member’s experience and knowledge to develop a visual ‘mock up’ of signage improvement through the hospital. We aimed to seek feedback from consumers using the same capture methods we had previously used to evaluate the effectiveness of the suggested improvements.

## **Working as a co-design team**

Co-design has impacted us on many levels. On a personal level, each member of the team found great satisfaction in being able to work with, empower and advocate consumers in their hospital journey.

The Lakes DHB core values are manaakitanga, integrity and accountability. Manaakitanga is the respect and acknowledgement of each other's intrinsic values and contribution. Integrity refers to truthfully and consistently acting for the common good. Finally, accountability refers to taking ownership of clinical and financial outcomes and sustainability, for the good of everyone.

As clinicians, we have been guided and strongly validated by these values throughout our co-design, in our ability to work with an enthusiastic consumer representative, and also through those who participated in our project.

We felt we were able to make an impact at an organisational level, as what better evidence is there to describe and inform our services than data direct from those who use them?

Our nursing colleagues have long observed the difficulties patients seemed to have in finding their way around the hospital. It was great to be able to assure nurses that our project had the strength of the consumer's voice to support their concerns.

We want to uphold our DHB values by acknowledging and respecting patients' experience and contribution through this project, and uphold the DHB's integrity and accountability by acting on this to improve patients' experiences of their hospital journey.

All in all, this was an empowering exercise for the team and consumers.

## **Measure**

Our plan was to collect data on the patient-suggested improvements using mock signs and solicit their feedback on these, but unfortunately, the signs were removed within 24 hours so we were unable to do so within the timeframe of this exercise. A lesson from this experience was to ensure strong, consistent communication between all parties, in particular between the project team and DHB management, and to not make assumptions about what stakeholders might know about our project intent.

Although we have no concrete measurements following our improvement phase, the signage committee member who attended our presentation promised to present our findings to the wider group in the hope of actioning our consumer-guided suggestions for improvement. We are awaiting feedback on this, and remain hopeful the capture of our patients' experience coupled with our DHB values will guide improvements to our hospital signage.



Above: Capturing the patient experience – photo board



Above: Preparing signs for walk-through at Taupo Hospital

## Our Lakes DHB project team

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