#### Jay O'Brien interview

Waitemata District Health Board (DHB) patient experience manager

Patients and staff telling their stories are an important part of the work Jay O'Brien does as patient experience manager at Waitemata DHB.

For Jay, it is a given that 'patient experience' incorporates family and whānau, and increasingly staff as well. 'It's really our "customer experience", which takes account of all our different stakeholders. We want to know what it's like to interact with services. How do we measure that and hear from people? And once we have all that information, how can we translate it into some sort of intelligence that allows us to drive change in the way the community would like to see?'

Storytelling at the DHB takes different forms. One is a library of nearly 20 videoed interviews with patients and/or their families and whānau. All the interviews are being uploaded to Waitemata's website so staff can watch them at any time. They are also being built into educational programmes.

'A couple of people who have made films with us have been happy to come in,' says Jay. 'So for last year's World Thrombosis Day we made films with a woman who had a pulmonary embolism and another who had a deep vein thrombosis, and one came in to support her film.

'We were playing their films in our main foyer for the general public and the woman in it came in to answer questions and talk about her experience directly. That was fantastic.'

Jay has a loose interview framework for the films, asking questions such as:

- What matters most to you?
- What do we do well?
- What don't we do well?
- If you were in front of a group of staff, what would you want them to go away remembering?
- If other patients and their families/whānau have a similar experience, what would be your key message to them?

Depending on the interviewees, he might also ask about cultural and language matters. He says that the most important things is to let people tell their stories in their own way. One story, for example, was filmed in Korean because the woman in it did not speak English. One of the DHB interpreters then provided subtitles.

'All the participants have been really appreciative that they're able to tell their stories and know staff will listen directly to their words, from their own lips and not translated by people in roles like mine.'

Other channels for storytelling include the DHB's 'In your shoes' and 'In our shoes' programmes – respectively, focus groups for patients to say what it's like to be 'in their shoes', and sessions where staff buddy up with colleagues they don't know to ask each other what makes a good day at work and what makes a bad one.

'They are incredibly popular,' says Jay. 'The "In your shoes" groups give us really rich information. So when we release staff to be listeners, we coach them in this 90/10 rule that they need to do 10 percent of the facilitating dialogue and 90 percent listening. They really value the chance just to hear directly from the public.'

### **Organisational values**

When Waitemata DHB wanted a set of organisational values, it co-designed them in consultation with more than 1000 members of the public and staff; when it wanted standardised noticeboards to keep people informed about quality matters, it went out to the community again, saying: 'You tell us what you want to see.'

# everyone matters

Every single person matters, whether patients/clients, family members or staff members.

### **f** connected

We need to be connected with our community. We need to be connected within our organisation – across disciplines and teams. This is to ensure care is seamless and integrated to achieve the best possible health outcomes for our patients/clients and their families.

## **66** with compassion

We see our work in health as a vocation and more than a job. We are aware of the suffering of those entrusted to our care. We are driven by a desire to relieve that suffering. This philosophy drives our caring approach and means we will strive to do everything we can to relieve suffering and promote wellness.

## **66** better, best, brilliant...

We seek continuous improvement in everything we do. We will become the national leader in health care delivery.

The DHB has now introduced four organisational values (illustrated above), within each of which are four further behavioural standards.

Devising them was 'a collective exercise in deciding what it looks like when we're providing the very best care', says Jay O'Brien, the DHB's patient experience manager.

'Having a set of values and then the behavioural standards that define what it means when we're living up to the values has been one of the single biggest promoters of cultural change here,' he says. 'The fact we have these gives us an incredibly solid platform to say to staff that this stuff is not about corporate messaging, it's what the community is telling us matters.'

The noticeboards being rolled out, which are known as 'quality boards', reflect the organisational values.

'Essentially, the quality boards are our public display of quality measures. They have information about patient experience and underneath that is staff experience. So, for example, we display the scores from our in-house survey of patients, which includes the question "How likely are you to recommend these services to friends and family if they need similr care or treatment?" But then, more importantly, we have space that says, "You said... we did". That's for individual charge nurses or service managers to just handwrite on there. There's an equivalent in the staff experience section, "Staff said...and then what we're doing about it".

'There's also space to talk about staff achievements – which might be that someone's got their masters or someone's completed a charity run – and for a staff photo, so the public can see who works on that ward or in that area.

Other parts of the boards deal with nutrition and hydration (including key performance indicators, the DHB's nutrition charter and meal times), safety improvement (including falls, pressure injuries, medication safety and preventing infection), and various other things in response to community feedback that said, 'If you're going to have a big board on the wall with all these public messages then there's other information we want that isn't about quality measures.'

Jay says one of his top recommendations for other DHBs looking to improve patient experience would be to have a similar set of co-designed organisational values, 'so you've got a really solid background to build all this work around'.

Waitemata carries out thematic analysis of its qualitative feedback from surveys and other channels – the themes being its values and 16 behavioural standards, and whether or not the DHB is living up to them.

Such analysis has prompted a campaign with the strapline 'The most welcoming DHB in New Zealand'.

Because, says Jay, 'our community say that in order for them to have a positive experience – which we know reduces anxiety, reduces pain, improves health outcomes, so it has tangible benefits – smiling and welcoming and being friendly really matter.'