





Case study by BOP District Health Board: Escalation of the deteriorating patient – perea te pere (ring the bell)

Context

This work was undertaken by the Bay of Plenty District Health Board (DHB) Māori Health Gains & Development (MHG&D). The main focus being on the wellbeing of Māori patients in the Kaupapa Māori Ward (KM 2A) and whether the patient and/or their whānau would 'perea te pere' when help is required or if they needed to highlight a noticed deterioration within the patient.

Aim

To:

- reduce harm from failure to recognise or respond to the deterioration of adult inpatients
- encourage patients and/or their whānau to 'perea te pere' whenever they have a concern or help is required.

Start-up

In a previous study with patients it was suggested that cards were placed at the beside with statements that would encourage the patients and/or their whānau to 'perea te pere'.

A set of three teardrop cards were designed in both te reo Māori and English and were hung on the patient's call bell. Another A4 card was stuck to the wall and filled by the nurse.

Ka pā mai te māuiui 'Perea te Pere' ki te kōrero i te nēhi If you are feeling unwell 'Ring the Bell' to talk to your Nurse

Ka pa mai te mauiui 'perea te pere' ki te kōrero I te nehi' If you are feeling unwell 'ring the bell' to talk to your nurse

If you are feeling unwell you or your Whanau can 'Ring the Bell'

If you are feeling unwell you or your Whanau can 'Ring the Bell'

Ka pa mai te mauiui mahua, ma tou whānau ranei 'perea te pere' If you are feeling unwell you or your whānau can 'ring the bell'

Ka
āwangawanga?
'Perea te Pere'
kia mōhiotia ngā
kaimahi,
ka hiahiatia te
āwhina

Still Concerned?
'Ring the Bell' to
alert staff that you
need access to
medical help

Ka awangawanga? 'Perea te pere' kia mohiotia nga kaimahi ka hiahiatia te awhina Still concerned? 'Ring the bell' to alert staff that you need access to medical help

Nau Mai Haere Mai ki a Kaupapa 2A

1 Something not right
2 DON'T hold tight
3 RING THE BELL!!

My Nurse today is

My Consultant is

If you are feeling unwell 'Ring the Bell' to talk to your Nurse

I expect to be discharged

Kōrero

If your health or the health of the person you are caring for is getting worse 'Ring the Bell' and talk to your Nurse

unwell you or your
Whanau can 'Ring
the Bell'

Mai

Still Worried about your Condition? If you are still worried after talking to your Nurse. You can ask to speak to the Shift Leader

Still Concerned?
'Ring the Bell' to
alert staff that you
need access to
medical help

After talking to your Nurse and the Shift Leader. If you are still worried you can ask for a Clinical Review. Ask a Nurse to call for you.



Nau Mai Haere Mai ki a te Riu Kaupapa Māori

1 Ehara i te tika2 Karanga atu, e hika

Perea te pere ki te kõrero i te nēhi

Perea te pere ki te korero i te nehi

Mā ngā hiahia katoa



I te rā nei, ko tāku nēhi ko

3 PEREA TE PERE!!

Ko tōku mātanga ko

Me wehe atu au a te

Ka pā mai te māuiui 'Perea te Pere' ki te kōrero i te nēhi

Kei te raru haere koe, ko tētehi atu rānei 'Perea te Pere' ki te kōrero i te nēhi

Kōrero

Ka pā mai te māuiu Māhau, mā tōu whānau rānei, 'Perea te Pere'

Mai

Kei te āmaimai tonu koe, ahakoa kua kõrero kē koe ki te nēhi? Me tono atu ki te kõrero ki te Shift Leader

Ka
āwangawanga?
'Perea te Pere'
kia mōhiotia ngā
kaimahi,
ka hiahiatia te
āwhina

Kua kõrero kē koe ki te nēhi, ki te Shift Leader, ka māharahara tonu, ā ka āhei e koe te tono i tētehi Clinical Review. Mā te nēhi koe e āwhina ki te tono



Engage

A team was engaged to continue with the project on the ward. Hui were held regularly with the clinical nurse manager, kaiwhakarite haumanu ake, four consumers and the Health Navigator.

Four whānau consumers who had been patients or related to patients in KM 2A were engaged and gave their stories to the Health Navigator.

Two nurses from KM 2A championed the project. They handed the cards out to all new patients and oriented the patients on the purpose of the cards.

Patients in KM 2A and their whānau were then interviewed by the Health Navigator.

Some patients preferred to tell a story of their experience in the ward/hospital. These stories have been recorded and those who gave the story also consented to the story being shared.

Capture

All patients interviewed did so using the Kōrero mai patient/whānau discussion questionnaire over the page.

When whānau were present, they were encouraged to participate in the discussion, and it was noted on the discussion sheet as whānau support.

Twenty patients were interviewed: 11 from 2A, two from 3B, one from 3A, one from HIA and five patients chose to tell their story to the Health Navigator rather than answer the questionnaire.

Kōrero mai – patient/whānau discussion – administered by Health Navigator

Kōrero mai – talk 2 me

Māori health gains and development – 2a, Tauranga Hospital

QUESTIONNA	IRE DETAILS								
Date		Time				Shif	t	AM	PM
Form number		NHI				Health Navigator			
Is participant pa	Patient			Whānau					
Consent to part and documenta									
Consent to reco									
Does the patier te reo Māori									
Do we require a		_							
Does the patier ensure their cor									

Patients only:

Questions and answers:

for Nga Pou Mana o Io

- A. Do you know about the Kōrero mai project taking place in this ward?
- B. Have you seen/read the cards attached to bell cord and placed on side table?
- C. Do you feel these prompts/cards will enable patients to be more interactive with their medical staff?
- D. Do you have other ideas that will encourage/enable patients to speak with their nurse?

He Pou Oranga Tangata Whenua

He Pou Oranga Tangata Whenua is our model of care that understands well being in five key relationships:

- Mana Atua gives us our connection to the spiritual world and influences how we react
- Mana Tūpuna our whakapapa, strengthens and guides

Commenced discussion following Māori health protocols

- Mana Whenua our tūrangawaewae, our own area
- Mana Moana Te Moana a Toi, affirms our wayfinding legacies
- Mana Tangata our own unique identity, qualities and attributes as human beings.

Te Toi Ahorangi

A strategic wellbeing plan led by iwi to achieve Toi Ora. Bay of Plenty DHB has adopted this iwi-led plan as an articulation of an authentic Tiriti partnership. The DHBs intend to become the first Te Tiriti-led district health board. Success is Toi Ora, which will be seen in the flouishing lives of our people, whānau, hapū and iwi. The most important transformation will occur within whānau, where the wayfinders of tomorrow will grow.

Understand

It was noted that whakawhanaungatanga is central to Māori relationship-building, and no matter what tools we put in place Māori will privilege relational connections and often this is more effective with Māori staff from within the ward or MHG&D.

Whakawhanaungatanga then is fundamental and is something all wards should see as obligatory for their patients.

We have a very small sample of Māori perceptions of other wards and they have not had the Kōrero mai cards at their bedside.

For the Commission this will require additional research, including the Health Navigator interviewing some of the staff in these wards and recording their insight.

What we already know is that KM 2A is getting it right and their patients are using whakawhānaungatanga and adopting this as a process of escalation for improved care that in a non-Māori world would be coined as 'who you know' not 'what you know'.

Improve

Patients loved

- 1. The whānau feel of the Kaupapa Ward.
- 2. The manaaki shown by the nurses in the Kaupapa Ward.
- 3. Whānau often know a staff member on the Kaupapa Ward, this gives them confidence to ask questions.
- 4. Being welcome to stay over with your whānau member.
- 5. Tikanga Māori on the Kaupapa Ward and how it influences the nursing of patients.

Patient concerns

- 1. Better communication from all medical staff.
- 2. Some patients did not remember their orientation to the wards.
- 3. Staff should engage with the patients a little more, being familiar gives a sense of being safe.
- 4. Amputees, especially the women would like to wear lava lava, going to the wharepaku is often very difficult and can be stressful.
- 5. Doctors need to be more open in their communications and ensure the patient and/or whānau are fully understanding of what they are saying.
- 6. Patients with whānau out of town can become very lonely, maybe the Pou Kōkiri can be used more in these circumstances.
- 7. Patient in 3A felt he was unable to have karakia with his whānau. He was uncomfortable to have karakia beside his bed as there were other patients in his area and the lounge room was

- full of people watching TV. He is a new amputee and he was unable to go downstairs to the chapel he says it is too far away from the wards and should be in the middle of the hospital.
- 8. Fourteen patients would like to see the Kōrero mai cards distributed to all wards, as there are Māori throughout the hospital

Measure

A spreadsheet was used to analyse the results of the interviews with patients.

Male	Female	Consent	Recorded	Te Reo	English	Pou Kokiri	Support	Nga Pou Mana o Io	Ward	Korero Mai cards	Comms Doctors	Comms Nurses	Staff Genuine	Karakia	Cultural Needs Met	Hoha	Whakama	Whanau	Comfort	Suggestions	Total o of 60	at %
																				Recorded by Megan		-
75									38	Not in this ward	7	7	5		0			7	5	de Lambert House Officer	31	51.67
																				Believes the cards will encourage Maori to		
-	63								2A	l explained the cards	8	8	- 8		- 6			8	8	speak up Communication and a	46	76.67
																				sense of familiarity will make patients feel		
																				safe. Appropriate		
	71								2A	Nurse had explained the cards	7	8	8		6			8	6	clothing for amputees - lava lava	43	71.67
										Had cards but												
61										couldn't remember the nurse explaining	1	1	1		1			1	1		6	10.00
																				If the Doctors were more open in their		
																				communications patients/whanau		
										Had not seen the										would feel more at		
	74					1			2A	cards	7	8	8		- 6			8	7	ease	44	73.33
84									2A	I gave a set of cards to the patient	7	7	7		7			7	7		42	70.00
										Cards not in this ward. Conversation												
63									38	recorded by Megan	9	7	7		7			7	7		44	73.33
										Nurse had explained		7	-		7			-				
75										the cards to him Cards not filled in	7								6		41	68.33
28					-	-			2K	daily Cards not used in	6	8	7		7			7	7		42	70.00
69									3A	this ward	8	7	7		5			7	7		41	68.33
										Saw the cards when he arrived in this								l				
										ward. Felt they are								l		Jordan wants his story		
26									2A	a good idea. But, he had a story to tell	6	6	6		6			6	6	told as he felt that no one has listened to him	36	60.00
									2K	Nurse had explained cards	8	8	8		6			7	7	young man and partner approx 22	44	73.33
							1			Nurse had explained										His whanau are in Australia and he is		
63						-			2A	cards	7	7	7		5	-	-	6	7	very lonely The cards should be	39	65.00
										Cards not in this										used throughout the hospital as there are		
\vdash	59									ward.	8	8	8		5			7	7	Maori in every ward	43	71.67
										The cards were on										Had only arrived at		
										the floor behind his bed. He had not										the ward and had been discharged by		
80						ļ			2A	seen the cards at all.	7	7	7		7			7	7	the next day.	42	70.00

Patient response to Korero mai cards in the wards

		Cards explained by Health Navigator	Cards explained by nurse	Cards not explained	Number of patients responding to survey – Kaupapa Māori ward	Other wards – cards not distributed	Not interested	Total
Have you seen the Kōrero mai cards?					10 66.7%	4 26.7%	1 6.6%	15
Who orientated you on how to use the Kōrero mai cards?		10 66.7%	4 26.7%	6.6%				15
Were they helpful to you?	66.7% – 10 patients from Kaupapa Ward felt that the cards would be helpful to those who maybe whakama. 6.6% – one patient was not interested and did not want to engage. 26.7% – four patients in the other wards agreed that the cards maybe useful throughout the hospital.							

Working as a co-design team

It is important for all health professionals to recognise the importance of He Pou Oranga Tangata Whenua and its understanding of wellbeing as represented in the following relationships:

- Mana Atua our connection to the spiritual world
- Mana Tupuna our connection to our descendants
- Mana Whenua our turangawaewae our lands, our home (or in a hospital bed our space)
- Mana Moana our wayfaring legacies
- Mana Tangata our identity

The establishment of Kaupapa Pākeha institutions of power and wealth have been privileged at the expense of Māori (Jackson 2004). Unfortunately, these systems continue today.

Some of the challenges for co-designing included capacity and resources. Staff were able to engage with patients and whānau while they were in hospital, but it was more difficult to follow up once the patient had left the hospital. Resources were designed to encourage patients and whānau to escalate any concerns immediately.

The project team

Name	Role
Anamaria Watene	Clinical nurse manager
Kaywyn Mckenzie	Whakarite Haumanu Ake
Marie Tata	Health Navigator
Rondell Reihana	Whānau consumer

Next steps

- 1. Finish off the interviews as suggested to add more weight.
- 2. Have a number for Māori to call while in hospital, to elevate concerns.
- 3. Partner closer with the deteriorating patients arm with Julia Braid.
- 4. Seek to get data around Māori deterioration on the wards and where it occurs most.
- 5. Look to spread the cards to the surgical wards.
- 6. Elevation of Korero mai alongside deteriorating patient as a unified approach.
- 7. Plan-do-study-act cycles to consider:
 - o phone number for escalation (who to?)
 - o kaupapa clinical outreach nurse, roving to work in partnership with patient at risk team.