CONFEREE ABSTRACT

Can you see what matters to me?

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**Introduction:** As staff we only see a small part of our patient’s life. On face value we see that they come into hospital for management of their condition. What we don’t always see is what it means to the children and their families. That is, unless we ask.

The Ambulatory Units at The Sydney Children’s Hospitals Network have undertaken a quality improvement project to bring visibility to “what matters to you” – using patient stories and an interactive white board to seek feedback from patients and families to co-design our services, make small but valuable changes, and drive cultural change within the teams.

**Methodology and Change Implemented:** A co-design and quality improvement methodology was used to create collaboration between consumers and staff. Two approaches were tested:

A large interactive whiteboard was placed in each unit to seek input from consumers on “what matters to you”

Patient Stories – patients with chronic conditions and their family members were invited to write detailed accounts of what it means to them to attend the Hospital

**Aim:** To test the use of interactive whiteboards and patient stories to ask “what matters to you” (an approach learned from international peers) to:

**Involve consumers in service design:** Drive cultural change within the unit and create an environment of continuous quality improvement

**Highlights:** Since implementation of this project twelve months ago – two cycles have been complete, involving:

Large white board placed in the unit with an invitation to patients/families to write/draw their feedback

Information/drawings were captured and responses recorded and themed

Responses were transformed into quality improvement projects or small scale changes

Actions undertaken were fed back to consumers on the Quality Board - “you said… we did”

The whiteboard was cleared to commence a second round

The interactive whiteboards increased conversations between consumers and staff, removing hierarchy and valuing consumer input. The culture change within the department was
significant, with staff realising that the little things that matter can easily be applied to improve the patient experience.

The patient written stories are being used to create one-page ‘what matters to me’ cards for each child. Feedback is also being incorporated into handover to make the ‘person’ more visible – such as “and Max enjoys chocolate milk with his infusion”.

**Sustainability and transferability**: This project is a self-sustaining way of encouraging continuous consumer engagement. The boards have become a central piece of “wall art” which has led to staff valuing this component of their work. This initiative can easily be scaled and spread across all units and we have recently extended this initiative to the Outpatients Department.

**Conclusion and lessons learned**: Using whiteboards as an interactive approach to invite consumer feedback has been an effective initiative in generating a culture of continuous quality improvement and service co-design. Three key lessons learned:

Seemingly small changes can have big impacts

Co-design doesn’t have to be formal

Making the feedback board “wall art” can change the culture within the unit and bring visibility to what matters to patients/families

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**Keywords**: culture; codesign; quality; consumers