

# Together | Tūhono

## *We are a high performing team*

What does our value of together | tūhono look like to our patients? What do they see when we work as a team? What is their experience like when we don't? To help us understand this better, we looked at comments from more than 2000 patients who talked about our teamwork. Of these, we found 1838 comments that talked about behaviours aligned with our values around team work, and 158 comments about behaviours we don't want to see. This report is a summary of these behaviours.

### Actions and behaviours aligned with our value of "together"

#### COMMUNICATE, COLLABORATE AND CONSULT

Our inpatients see our "together" value in practice when the clinical team work together and are on the same page about the patient's history and plan of care.



**80%**

OF INPATIENTS RATE THE WAY DOCTORS AND NURSES OR MIDWIVES **WORK TOGETHER AS VERY GOOD OR EXCELLENT.**

#### INCLUSIVE HANDOVER

Our patients tell us that a good handover is one which includes the patient and takes into account his or her views. Those who told us about their experience of handover said they preferred staff to stand around the bed rather than at the end - this way the patient is fully at the centre.



*"The different teams I met with all seemed to be on the same page. [The] consistency with my team of doctors and specialised nursing staff [meant] I felt confident that everyone understood my case and were working together to provide the best care for my needs.."*

**80%**

OF INPATIENTS RATE THE WAY ALLIED HEALTH **WORK TOGETHER WITH OTHER MEMBERS OF THE HEALTHCARE TEAM AS VERY GOOD OR EXCELLENT.**

#### KEEP EACH OTHER INFORMED

Ensuring that clinical records are kept updated and accessible to all staff who need them is key to seamless coordination between different teams. Our patients tell us this is particularly important for information around treatment decisions, pain relief and any adverse drug reactions.

*"I liked the new handover on the ward where my care was discussed openly in front of me and I was invited to add anything I thought the next team should know."*

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THERE IS A STRONG CORRELATION BETWEEN **CONSISTENT AND COORDINATED CARE** IN HOSPITAL AND OVERALL RATINGS

Research has shown that teamwork benefits healthcare providers by reducing extra work and increasing job satisfaction. Teamwork benefits patients by reducing preventable adverse drug reactions and decreasing morbidity and mortality rates.

(Bosch, B. & Mansell, H. Interprofessional collaboration in health care Can Pharm J (Ott). 2015 Jul; 148(4): 176-179.

# Actions and behaviours aligned with our value of “together”

## ACHIEVE TOGETHER, AS A TEAM

The provision of care is a partnership. Patients want to be active participants in their care and treatment. They ask that plans and procedures are communicated clearly and that their input is sought as part of this process.



*“I was handled between [several] different departments [and] it was great to see the teamwork and support of each other. Each time I moved around the staff were thorough in briefing both myself and the next person in the chain.”*

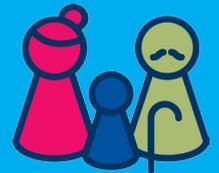
## HELP PATIENTS UNDERSTAND TEAM ROLES

Understanding who is on their team, and what role they have is important to our patients. They ask that clinical staff very briefly explain their role and how they fit in to the team when they first introduce themselves. Some say that, where possible, they like to know who the team leader is “in charge” of their care and treatment.

*“My whānau knows my condition and knows how to care for me at home, so they give all information to the staff for my treatments.”*

## INVOLVE WHĀNAU

Our patients appreciate it when whānau, families and other support people are treated as and referred to as an integral part of the care team.



**SEVEN OUT OF 10** INPATIENTS (72%) SAY THEY WANT SUPPORT FROM WHĀNAU, FAMILY AND FRIENDS.

**89%**

OF THOSE WHO WANTED SUPPORT SAY THEIR WHĀNAU, FAMILY AND FRIENDS WERE **DEFINITELY** MADE TO FEEL WELCOME AND ABLE TO SUPPORT THEM.

## SERVICES ARE COORDINATED

Our inpatients appreciate when we coordinate with both internal and external services to ease their transitions into and out of hospital. They tell us this works best when staff are aware of their needs (i.e. other health conditions, childcare or work responsibilities), when clinical records are up to date and when patients are kept informed of what is happening.

*“The discharge document sent to [the private hospital detailed] the condition, the treatment provided, the medication and the likely prognosis. There was a full list of the medication and the amount provided. It made for a easy transition from public to private hospital.”*

*“We were waiting for quite a while in ED to see the surgical team but the nurse kept us updated, explained they were busy but were aware we were waiting to be seen. Even though it was a long wait, that made a real difference.”*

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THERE IS A MODERATELY STRONG CORRELATION BETWEEN **COORDINATION BETWEEN HOSPITAL, HOME AND OTHER SERVICES** AND OVERALL RATINGS

**72%**

OF INPATIENTS RATE THE COORDINATION OF CARE PRIOR TO ADMISSION AS **VERY GOOD OR EXCELLENT**.



# Behaviours that don't reflect our value of together | tūhono

30%

OF INPATIENTS SAY THEY RECEIVED CONFLICTING INFORMATION FROM STAFF **SOMETIMES** (23%) OR **OFTEN** (7%)

## GIVING PATIENTS CONFLICTING INFORMATION

Patients find it extremely frustrating when they are given conflicting information from different staff members. They tell us this often happens when clinical records are incomplete or not updated, when staff do not check the patient history or the clinical records, when teams do not consult or communicate with each other about what has been said and decided or when test results are not available.

## DISAGREEING IN FRONT OF PATIENTS

Whilst some of our inpatients say they appreciate robust discussion around their care and treatment, it made others deeply uncomfortable when staff openly disagreed in front of them.



*"There seems to be no communication between the different departments I am under. This means I get given conflicting advice and specialists who should have been informed and involved in decisions about my care are left out until it creates another issue for me health-wise."*



Behaviors such as poor coordination, conflicting information, blaming others, and disrespect are all signs of poor teamwork, which is associated with higher patient mortality and lower staff well-being.

(McDaniel et al., Physicians Criticizing Physicians to Patients. Journal Gen Intern Med. 2013 Nov; 28(11): 1405-1409.)

## BLAME PATIENTS FOR THEIR CONDITION

A minority of patients told of their dismay when they felt that clinical staff blamed their health condition, or the health condition of their children, on their actions or decisions.

*"The verbal disagreement between [staff] over my discharge turned a 3 hour stay into an overnight stay in hospital while delaying my [other] treatment for a day. This should not have been sorted out in front of me."*

*"I struck one doctor that made me feel repeatedly regretful for the choices that I had made as part of my birth plan."*

## NEGLECTING TO TELL PATIENTS ABOUT THE TEAM

Our patients say they like to know who is 'in charge' of their care and treatment, and find it difficult to know who to talk to when this is not clear. They especially like to know who has oversight over their care and can explain what is happening next, and who has the 'last word' if they are given conflicting information.

*"I feel as though I was passed from one team to another and no one has taken responsibility for helping me get better."*



ALMOST ONE IN FIVE PATIENTS (18%) RATE THE COORDINATION OF CARE AFTER DISCHARGE AS **POOR** OR **FAIR**

## LITTLE OR NO POST-DISCHARGE COORDINATION

Patients say they feel "anxious", "abandoned," and "isolated" when they do not receive promised post-discharge follow up. Whilst some know how to navigate the system to get the follow-up they need, others are left waiting and worrying.

# How are we doing overall?

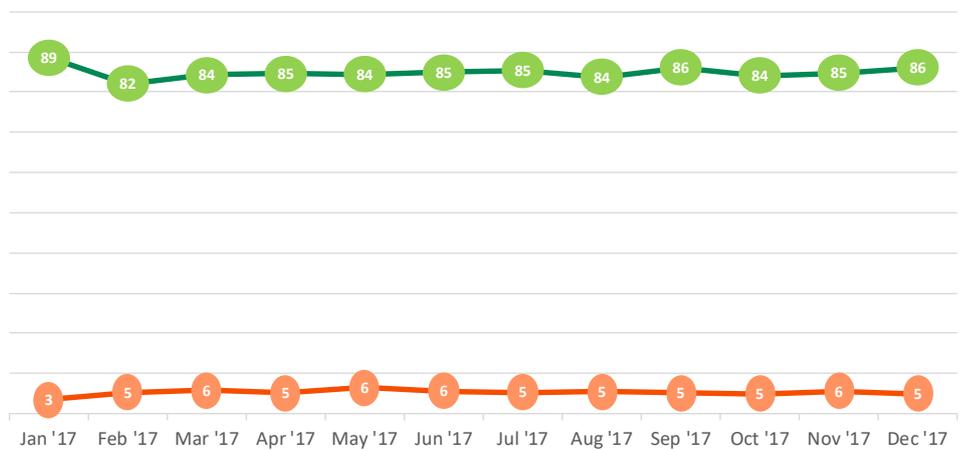
## OVERALL RESULTS

### HOW DO WE RATE? (JAN 2017 - DEC 2017)



In 2017 an average of 85% of respondents to the patient experience survey rated our care as 'excellent' or 'very good.'

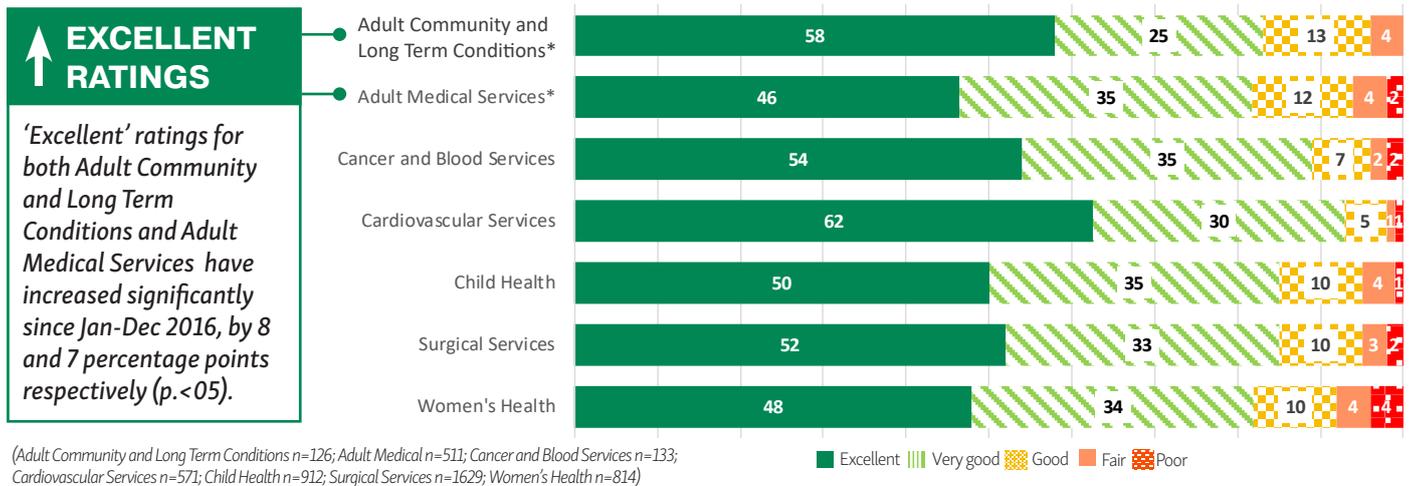
### COMBINED VERY GOOD AND EXCELLENT, AND POOR AND FAIR RATINGS, JAN 2017 - DEC 2017 (%)



## BY DIRECTORATE

Cardiovascular Services well exceeded the ADHB target of 90%, with 92% of respondents rating their care very good or excellent in 2017.

### OVERALL RATINGS, BY DIRECTORATE JANUARY 2017 - DECEMBER 2017 (%)



## DIMENSIONS

Our inpatients are asked to choose the three things that matter most to their care and treatment, and then rate our performance on those dimensions.

