

# ‘What Matters To You?’ Day 2021 Report

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# 1. Executive Summary

What Matters To You? (WMTY) is an international person centred care movement, and is an opportunity for NHSGGC to build on its national and international profile, shining a light on what matters most and demonstrating continued commitment to person centred care, in line with the [Healthcare Quality Strategy](#).

WMTY conversations are encouraged every day between staff who provide care and the people, their families and carers who receive it. The underlying principle of WMTY – **ask, listen and do what matters** – is intended to shift power to the person who knows best about the help or support they need.

WMTY Day aims to raise the profile of these meaningful conversations, building a global culture of person-centredness. When staff have a conversation about what really matters to the people they care for, it helps align care with patient preference, build trusting relationships between people, and advance person-centred care.

NHSGGC has taken an early leading role in this global movement, which has now spread to 49 countries around the world and has been integrated into workflows at diverse care settings including primary care, care homes, behavioural health, substance use treatment programs and community based social service organisations.

This report outlines NHSGGC's activity for WMTY Day in 2021 (WMTY21).

On Wednesday 9 June 2021, we encouraged all staff to have WMTY conversations with people they are caring for, those who matter to them, and their colleagues, each and every day to improve care. The scope of WMTY21 activity in NHSGGC was widened this year to increase involvement from acute wards and Health and Social Care Partnerships, and inviting Care Homes, and prison health care to be involved.

The Person Centred Health and Care (PCHC) Team working with the multidisciplinary person centred care group led and coordinated NHSGGC's activity for the day.

To encourage participation, in the days and weeks leading up to WMTY21, communications focused on showcasing WMTY approaches taken by different teams, demonstrating their routine WMTY conversations and plans for WMTY day itself.

People were encouraged to share what mattered to them via corporate communications channels, local teams, refreshed WMTY resources, and targeted conversations with the PCHC team.

748 people shared what mattered to them with NHSGGC social media channels, or with the PCHC team. Glasgow was ranked top globally for activity on Twitter, with our posts receiving significant interaction and in some cases, up to 16,000 views.

Around half of responses received centrally were from staff, and half told us what mattered to the public. Key themes from responses were:

- Relationships – valuing the important people in their lives;
- Quality of care – tailoring care to the individual needs of people receiving care, and ensuring they are home as quickly as possible;
- Wellbeing – being able to spend time doing the things that make them happy;
- Staff governance – staff feeling valued in their role, and being happy at work.

To support local person centred learning and reflection, people were encouraged to discuss what mattered to them with their local teams.

WMTY21 provided the opportunity to hold meaningful conversations with people, to listen to what is important to them. To strengthen the WMTY approach in NHSGGC, it is recommended that:

- A board wide working group be established, reporting to the Person Centred Care Steering Group, to take forward the planning and coordination of WMTY Day, so we can create a wider reach of WMTY activity to reflect on, share and learn from.
- Time is invested across the year to reinforce the importance of holding meaningful conversations with patients and families about what is important to them in the context of their care, their health and wellbeing and for staff in relation to their health and wellbeing and work life balance.
- The success of the social media campaign is built on, particularly with a focus on meaningful video content and encouraging participation from the public
- Resource distribution is managed proactively to encourage wide participation of all teams in NHSGGC.

# 2. Ask what matters

COVID-19 restrictions necessitated a primarily virtual approach to WMTY21 activity. As such, the PCHC team linked in with local services and Corporate teams to create communications messages to increase awareness of local teams and their WMTY approach, and encourage people to participate in the day. The team also sourced WMTY resources, and organised distribution to local services who had expressed an interest.

## 2.1 Corporate Communications channels

### 2.1.1 Communications activity

Due to the restrictions imposed by the COVID-19 pandemic, WMTY21 was primarily virtual in approach, with the bulk of activity reported on social media.

To encourage participation, in the days and weeks leading up to WMTY21, communications focused on showcasing WMTY approaches taken by different teams, demonstrating their routine WMTY conversations and plans for WMTY day itself.

In total, WMTY21 activity was promoted using 8 key messages, which formed the basis of a communications campaign. The campaign focused on sharing best practice approaches taken by local teams and services (spotlights), and reminding people of arrangements for the day.

To share these key messages as widely as possible, the Communications and Public Engagement directorate shared 35 posts on Facebook, Instagram and Twitter between Thursday 3 June and Friday 11 June in celebration of WMTY, including excerpts from patient feedback on Care Opinion, staff celebrating WMTY (see example in Figure 2.1) and Board Members sharing what mattered to them.



Figure 2.1 Staff at the Beatson share what matters to them

Table 2 overleaf contains links to each of the key messages used to support communications activity.

**Table 2: WMTY21 key communications messages**

Key message	Description
<a href="#">Invitation to register</a>	Information about how to order resources, and encouraging teams to consider their plans for the day.
Spotlight on <a href="#">Ward 4 GRI</a>	Narrative from the Senior Charge Nurse about how the ward ask, listen and do what matters for their patients, families and colleagues every day.
<a href="#">WMTY webpages</a>	Refreshed content focuses on information on past WMTY days, hosting links to best practice resources, and information for staff and the public.
<a href="#">Reminder</a> of WMTY day and how people can participate	Information about how to order resources, and encouraging teams to consider their plans for the day.
Spotlight on <a href="#">Leverndale's</a> preparations for WMTY21	The team describe how they encourage people to participate in WMTY day at Leverndale each year (See case study overleaf).
Spotlight on the <a href="#">IRH Pharmacy</a> team	The team planned to test out different approaches to having meaningful conversations with people, and outline their approach to doing so.
<a href="#">Launch of a video</a>	The Deputy Nurse Director – Corporate and Community encourages people to take part in WMTY21, and a local team illustrate the difference having meaningful conversations can make.
A <a href="#">thank you</a> to teams for participating.	Staff are thanked for all their WMTY efforts, and encouraged to share the detail of this with the PCHC team.

The case study overleaf is an example of the spotlights created, namely Leverndale Hospitals' approach to celebrating WMTY21.

### 2.1.1.1 Case Study: What Matters To You? Spotlight on Leverndale



Wednesday 9 June 2021 is What Matters To You? (WMTY) Day. We're encouraging everyone to have a meaningful conversation with the people they care for, their families, and colleagues, about what matters most to them.

WMTY day is celebrated and promoted internationally every year; here, Jenn Wyld shares her WMTY story; how she has focused on asking, listening and doing what matters to her patients at Leverndale over the last 4 years:

**“Asking, listening and doing what matters for my patients every day is part of my role – to be an advocate for them.**

**What Matters To You Day provides us with a really good opportunity each year to refocus on these conversations, and provide space for them to happen.**

**The first year I was involved, we organised an afternoon tea on my ward. We had 24 patients, 15 family members, the Mental Health Network, carers organisations and all the multidisciplinary team in one room together. There was about 100 of us in the one room. You could see people sitting down and having conversations, family members were getting the opportunity to meet psychologists, speech and language therapists, dieticians... you could just see it all being joined up for people. I'll always remember the woman who said “all my son ever tells me is ‘bring me up fags’, I don't see anybody. Today, I've seen activity timetables, therapists, and all the staff who care for him. It just joins it all up so much for me”.**

**After the day we take photos of the display of what everyone has said matters to them, send the photos across the site, and leave the display up for people to look at and think about. We bring it up at the next community meeting to discuss, and it gets reported through our governance structures.**

**Over the years the day has built up and up, as people have seen the value in what we're trying to do. This year I'm so excited; I'm to organise WMTY activity for the whole Leverndale site – all wards. My managers have given a budget – we're going to have gazebos in the car park so people can have socially distanced conversations, and a balloon arch. It feels like the WMTY approach is really catching on!” [Leverndale WMTY21 Spotlight](#)**

## 2.1.2 Impact of communications activity

“NHSGGC staff shared a high number of content on Twitter, which helped to promote WMTY and showcase department celebrations. Their tweets demonstrated that the initiative is key to delivering person centred care, and WMTY is not a ‘corporate’ social media campaign...the campaign was engaging and continued to capture patient and staff’s interests”. *Digital Engagement Officer, Patient Experience Public Involvement Team*

The post with the highest level of engagement was issued in the lead up to WMTY day; a [spotlight on Ward 4 GRI’s](#) approach to asking, listening and doing what matters to their patients every day of the year. In total, the posts relating to this content received 47 comments (including Twitter replies and quote tweets). The comments comprised positive feedback about NHSGGC, and appreciation for the team’s commitment to person centred care, as illustrated and linked in Figure 2.2 below:

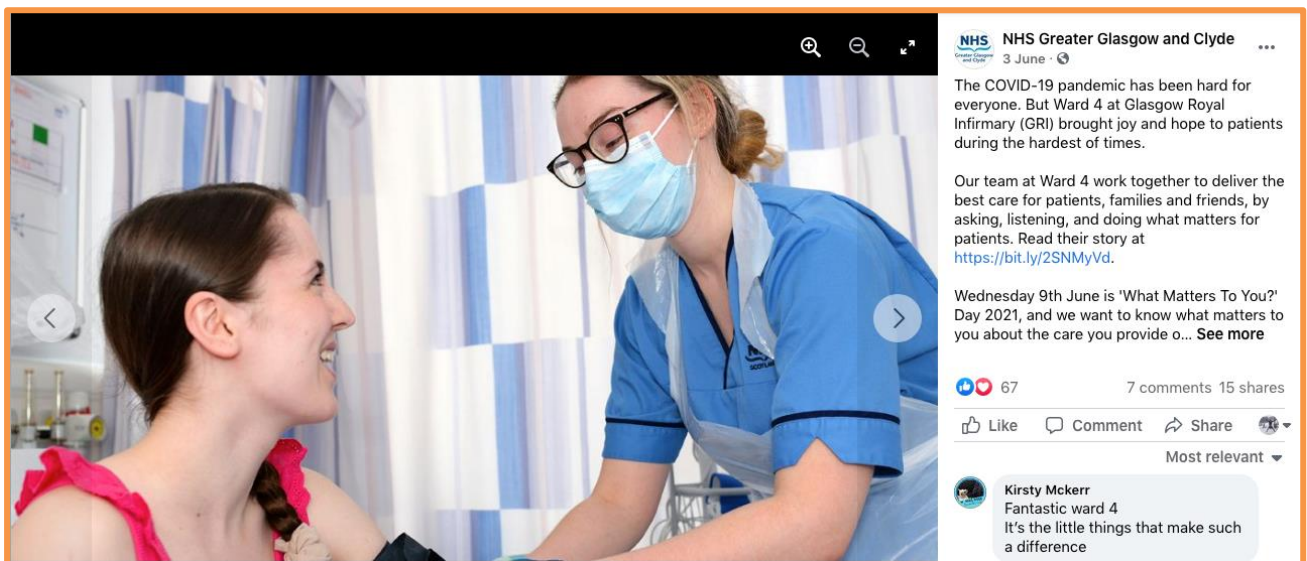


Figure 2.2: Facebook post outlining Ward 4 GRI's routine WMTY approach

Engagement in social media content was higher than usual for the NHSGGC corporate accounts. In addition, Glasgow ranked as the top city globally on Twitter for WMTY day activity - with posts gaining up to 16,000 views.

## 2.2 Local team activity

In addition to encouraging virtual activity, 100 resource packs containing locally printed resources (posters, pledge templates and stickers), supplemented by national resources remaining from WMTY19, and were distributed to local services from a central NHSGGC location.

The NHSGGC account was tagged in 94 tweets from NHSGGC staff showcasing department celebrations, as well as what matters to our staff, on WMTY day.



## 2.2.1 Case Study: WMTY21 in Inverclyde care homes

All NHSGGC teams were encouraged to take part in WMTY22, including acute services, mental health, care homes, Health and Social Care Partnerships, and health care prison services.

This year, Inverclyde care homes took a coordinated approach to activity so that residents, their families and staff had the opportunity to have meaningful conversations about what mattered to them. Resource packs were requested for all 12 care homes. After sending to a central location, these were distributed to each care home to ensure all had the resources available on the day.

Merino Court Care Home had a 'reminiscing day', where residents **“loved looking at pictures and speaking about their childhood; their parents, school, their husband or wife and children. It was a lovely day for them”**. *Wellbeing coordinator, Merino Court Care Home.*

Figure 2.3 below illustrates some of the WMTY21 activities undertaken by the teams:



Figure 2.3: What matters to residents, their families and staff in Alt Na Craig, Merino Court and Glenfield Care Homes

# 3. Listen to what matters

WMTY is centred on having meaningful conversations at point of care. We asked people to share examples with us of what mattered to them, so we could learn as an organisation.

We learned what mattered to 748 people via:

- Social media (52% of responses)
- The PCHC team, either by direct email, through conversations the team had with staff to find out what mattered to them about care planning, or by being sent reports about local activity and learning (47% of responses)
- The Communications team (3% of responses).

51% of the responses we received were from staff. 26% from people receiving care, and approximately 3% were family members. The remainder did not disclose their role, apart from 3 charity participants.

Figure 3.1 illustrates the key themes of what people told us mattered to them. Further detail is provided in the following sections to illustrate what was important to 80% of the people who contacted us:

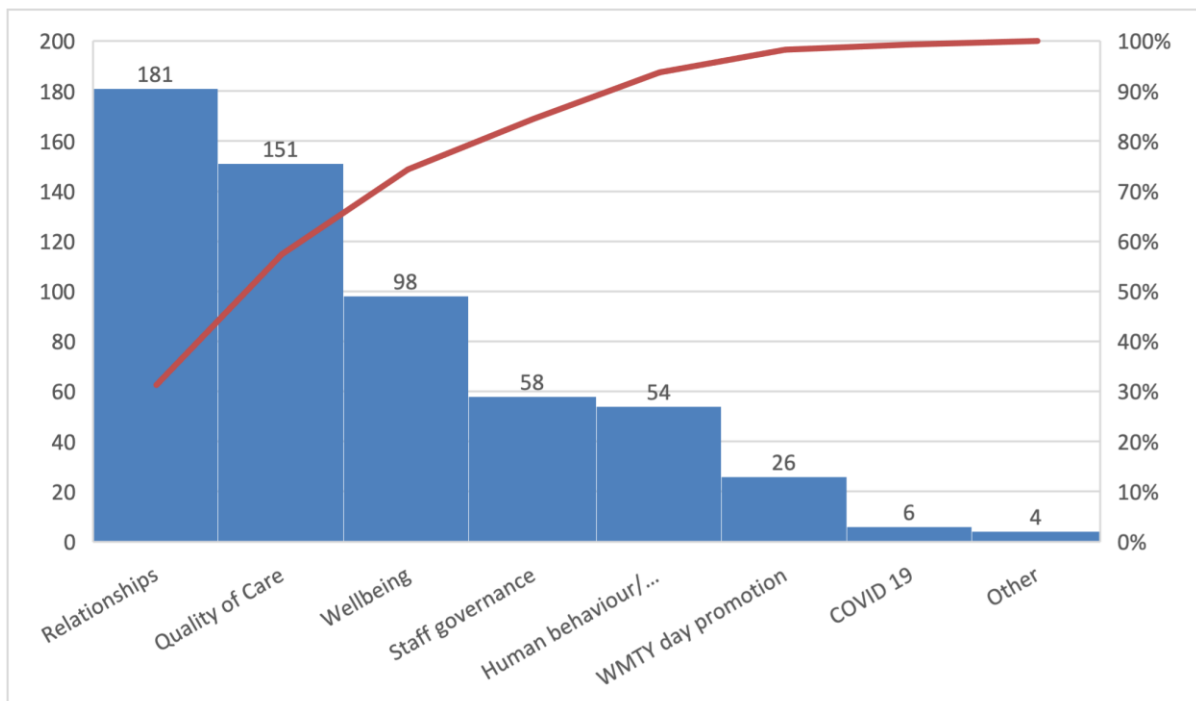


Figure 3.1: What matters to people on WMTY21?



## 3.1 Relationships

181 people said the relationships they had with family, friends, staff and people receiving care, mattered to them, as evidenced in the following two examples:

**“My son visits me and brings me things to eat, he lets me know how my two granddaughters are doing at school”** *Patient in mental health ward, Inverclyde*

**“We held conversations with patients and staff. General consensus was that for everyone after 18 months of Covid19 restrictions – family was the most important thing to them...”** *Staff member in renal dialysis unit, QEUH*



## 3.2 Quality of care

151 people told us that the quality of the care they provided or received was important to them. This spanned a range of areas; for some, being involved in their care was important (as exemplified in Figure 3.2 opposite).

Others wanted to be discharged; and some prioritised symptom control and comfort.



Figure 3.2: What matters to a mum in neonates, RHC



## 3.3 Wellbeing

98 people told us they are enjoying spending time doing the things that make them happy, particularly in terms of freedoms which have gradually been granted as COVID-19 restrictions ease, as illustrated in the following two examples:

**“Movie afternoon for some of our patients at Stobhill”** *Staff member, Stobhill Hospital*

**“Family and friends, to be happy in my workplace, holidays, sleep, water sports, fun-filled weekends, tasty food and drinks”** *Staff member, Beatson West of Scotland Cancer Centre*



## 3.4 Staff governance

58 people talked about the importance of ensuring staff feel valued and supported in their role, and have appropriate training and development opportunities. Staff talked about the importance of work life balance, and of feeling happy at work, as exemplified in Figure 3.3 opposite.

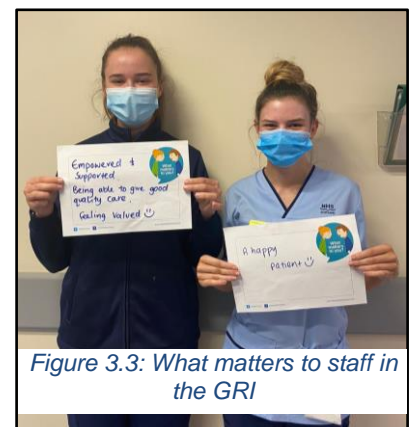


Figure 3.3: What matters to staff in the GRI

## 3.5 Case study: Ward 38, GRI

Ward 38, an Older Peoples' ward at the GRI, had requested WMTY day resources from the PCHC team. In response to a survey from the team asking for their experiences of listening, and what had changed for them as a result, the ward had the following reflections:

**“Hello! I am a staff nurse in ward 38 at Glasgow’s Royal Infirmary, we work with elderly care and enjoy many tales from our lovely patients.**

**On [WMTY21] we had a bingo and blether afternoon, where we invited visitors to join us in our game. We set out tables and chairs 2m apart, bought prizes and every person who won had to tell us something about themselves that they were happy to share. We had so much fun we also added a quiz! We had a fantastic couple of hours.**

**One lady spoke about the number 49 being so significant because it was the age she lost her mum, another told us of the old maternity units and how strict it was! We also found out one of our patients loved Elvis, and on the quiz was able to answer every question on Elvis. We also had a good giggle at all the bingo jargon – waiting on a bus! Rather than a number.**

**The prizes used for our bingo day consisted of sweets and juice, so some of the patients got their visitors to bring in little prizes such as bubble bath and other toiletries, I have also spoken with our ward manager to try and organise some time to carry out another bingo and blether afternoon, one weekend.**

**[Next year] I will plan something well in advance and be more prepared, although the patients enjoyed our day just the same, also it would be nice to have stickers for them for taking part!”**

# 4. Do what matters

People were encouraged to share what mattered to them with their local teams, to support local person centred learning and reflection.

Many comments demonstrated peoples' appreciation that staff do, in many instances, already focus on asking, listening and doing what matters to people every day.

Local teams have been encouraged to share with each other and with the PCHC team, their reflections on the day and how we can ask, listen and do what matters every day of the year. In the example below, staff from a mental health ward explain how they plan to act on what they have heard matters to patients, families and colleagues:

**“Planned next steps: hopefully moving back to person centred visiting as able. Move forward with sensory garden at site in the Vale of Leven Hospital. Next year, hopefully be allowed more visitors/friends and make it an event”**  
*Staff member, mental health wards, Vale of Leven Hospital*

Based on the key themes from what we heard, potential areas for further development across NHSGGC could be:

- A renewed focus and appreciation of the importance of relationships – people valued the relationships they had with patients, family members and staff
- Acknowledging the importance of delivering high quality care at all times – which is safe, effective in rehabilitation or symptom control and comfort, and is personalised to each individual wherever possible. The Person Centred Care Planning Improvement Group is taking forward the development of core principles to underpin a person-centred approach to planning care – this report will inform the development of this work, alongside feedback from an engagement survey and workshops.
- Supporting people to focus on wellbeing; by encouraging a work life balance for staff, and opportunities for everyone to undertake activities they enjoy.

To support further learning and reflection, this report will be shared with the NHSGGC Person Centred Care Steering Group, published online on the WMTY webpages, and highlighted in a Core Brief.

# 5. Meaningful conversations

In the case studies on the following pages, Claythorn House and the pharmacy team in Inverclyde Royal Hospital explain how they have focused on the whole process of asking, listening, and doing what matters.

## 5.1 Case Study: Claythorn House

Julie Fitzpatrick, Professional Nurse Lead for Learning Disability Services, explains how WMTY conversations underpin care planning in Claythorn House, a Learning Disability Assessment and Treatment Unit:

**“Having meaningful conversations with patients about what matters to them is core to learning disability practice. How could you work with someone if you didn’t know what mattered to them?”**

Here at Claythorn House, we tend to have that conversation on admission or as close to then as possible, as obviously it can take some people a while to settle in. We find out what’s important to each individual, and that is used to inform their plan of care while they’re with us.

For us, it’s about a joint approach to care planning – we’re planning care with each person, not to them. We ask what they want from their care plan.

The care plans here help to inform other staff about that person – their medications, their history (for example, if their parents are deceased). Students here say it helps them get to know the person before they talk to them.

Care plans which have been informed by WMTY conversations help staff to get to know the person better – they can get a holistic view and build up a therapeutic relationship. It helps build rapport, but it’s also a vital tool to help keep people safe – for example, during these conversations we’ve found out about any allergies a person might have.

I’m always reminded of a mum, who’d had a bad experience where her son had sensitivities to certain drugs, which weren’t picked up. She said to me – ‘if people would just ask, listen, and do what matters, that would make such a difference’.



Figure 5.1: What matters to a patient in Claythorn House

## 5.2 Case study: IRH Pharmacy Team

For WMTY21, the Pharmacy team in the IRH wanted to test a way to think about medicines within WMTY conversations, to inform a team wide WMTY approach.

The team spoke to 85 service users, families and colleagues on the day, recording what mattered to people on WMTY posters, and completing questionnaires about their experiences, so they could capture their learning, and consider how they would carry this forward to future years.

Some staff predicted that posters returned from service users and displayed in the pharmacy window could appear quite negative; they anticipated that time taken to receive medications would feature in the comments. However, they have reflected that

**“The service review comments show that the pharmacy service is recognised and appreciated... it shows we care about patients and their lives... I will ask a similar question in future to open up discussions around medicines”.**

The team also took the opportunity to reflect on how this approach could be adapted so all felt comfortable having meaningful conversations with people about what mattered to them in future, for example:

**“Question was awkward to ask in a formulaic fashion...reframing the question became more useful... overall more job satisfaction by taking the time for patients.”**

The conclusion below is taken from the team’s summary report:

**“In summary, we have gathered a lot of information from our participation in this WMTY day trial. Those who undertook staff and patient interactions reported better job satisfaction. Observing interactions [between staff] resulted in meaningful information being shared, but there is work to expand this to include patient views.**

**There were common themes throughout the questionnaires, particularly around supply, efficacy and knowledge of medicines.**

**A number of staff reported feeling awkward asking [what matters to you?] and would prefer to rephrase ‘what matters to you about medicines?’ to open up a better dialogue.”** *IRH Pharmacy WMTY21 summary report*

## 6. Reflection and recommendations

WMTY Day 2021 provided the opportunity to hold meaningful conversations with people to listen to what is important to them, in the context of recovery from a worldwide pandemic.

### 6.1 Virtual approach

Due to the restrictions imposed by the COVID-19 pandemic, the corporate approach to WMTY21 was primarily virtual, with the bulk of activity reported on social media. This provided a route for collection and analysis of WMTY responses, with Glasgow having the highest activity globally on Twitter on the day.

However, social media posts are often one way, character limited broadcasts. This means it can be difficult to encourage a meaningful two way conversation on social media.

Many local teams adapted to the virtual environment by having meaningful two way conversations in person, and celebrating this on social media; therefore combining the benefits of virtual and in person approaches.

Virtual best practice resources were created for WMTY21. Positive feedback was received in particular about the spotlights on local team approaches, for example:

**“Fabulous to see so many of my colleagues getting on board”** *Response to NHSGGC WMTY21 social media post*

As referred to in Table 1, a [video](#) of a team discussing their routine WMTY approach was produced. The clinical team filmed were appreciative of the opportunity to showcase their person-centred ethos; however to date the video does not have a high number of views. The Corporate Communications and Public Engagement Directorate have advised that short soundbites are usually the most engaging on social media.

It is therefore recommended that, for WMTY22:

- If restrictions allow, people are encouraged to have meaningful conversations in person, and to share their reflections on this experience
- People are encouraged to film their own short soundbites saying what matters to them, and to share this on social media
- Video content is maximized beyond WMTY day; for example, if it would be appropriate for inclusion in training resources
- Two-way communication is encouraged on social media, so we can have meaningful conversations virtually.



## 6.2 Resource distribution

Organising onward distribution of resource packs from a central point worked very well; the Transport team delivered resource packs timeously to every location. However, organizing local printing of resources had longer timescales than was anticipated (over 1 month). In addition, relying on local services to request resources meant that not all teams had resources to support their meaningful conversations with people receiving care, their families, and colleagues.

Those who requested resource packs fed back that the time delays to receiving the pack due to long printing timescales meant that they felt they did not have as much time to prepare for WMTY21 as they would have liked:

**“It would be helpful to have the WMTY packs a few weeks prior to the actual day – we didn’t receive them until 12 hours prior to the actual day itself”** *Staff member, Regional Services*

It is therefore recommended that for WMTY22:

- The national team support earlier provision of plentiful resources, as was the case pre-COVID;
- Resources are once again delivered to a central NHSGGC location for onward distribution by transport services;
- To ensure equity of opportunity, resource packs could be proactively distributed to all teams across NHSGGC, rather than waiting for teams to self-nominate;
- Printing commences 3 months before WMTY22.

## 6.3 Hearing from people who receive care

When looking at WMTY feedback reported centrally, a third of the people we heard from identified as people receiving care, or their family members. The origins<sup>1</sup> of the WMTY approach are predicated on the importance of focusing on what matters most to those **receiving** care, and taking this into account in care delivery.

<sup>1</sup> Barry, M., and Edgman-Levitan, S., (2012). ‘Shared Decision Making – The Pinnacle of Patient-Centered Care’. *The N Engl J Med*; 366: 780-781. Available at: <https://www.nejm.org/doi/full/10.1056/NEJMp1109283> (Accessed: 29 September 2021)

It is also important to speak to staff about what matters to them as professionals; this has become a core competent of building joy at work and staff wellbeing. The focus of the conversation should be inclusive of people receiving and providing care. However it can be more challenging in the virtual environment to glean valuable insights into what matters to patients.

The Corporate Communications and Public Engagement Directorate advise that

**“...the majority of WMTY tweets shared by NHSGGC teams centred on what matters to staff. It would be good to increase the amount of content which shares what matters to patients, particularly on Facebook and Instagram, as there were less posts shared on these platforms, compared to Twitter... Additionally, we receive more interaction with patients on these platforms too.**

**The Instagram stories were a great start to achieving higher levels of engagement with patients about what is important to them.”** *Corporate Communications and Public Engagement WMTY21 Social media feedback report*

It is therefore recommended that the WMTY22 campaign has a renewed and explicit focus on meaningful conversations between people providing and receiving care, and the impact, reflection and learning resulting from these.

## 6.4 Doing what matters

As this report has illustrated, people were encouraged to share their WMTY21 activity centrally, so this could be analysed to understand key patterns and themes in what matters to people in NHSGGC. This approach has limitations, not least that not everyone has reported their conversations centrally.

WMTY is about building relationships between people providing and receiving care; therefore learning, change, reflection and improvement is important at point of care. Whilst key themes can be garnered and reported corporately, there may be unheard opportunities for reflection and improvement.

It is therefore recommended that in addition to encouraging local teams to ask, listen and do what matters, WMTY22 focuses on understanding peoples' experiences of having meaningful conversations; what worked for them, what made it difficult, and what impact it had on care. This could then be used to inform the workplan of the Person Centred Care Planning Improvement Group.

In order to achieve this, it is recommended that a board wide working group, reporting to the Person Centred Care Steering Group, be established to take forward the planning and coordination of WMTY Day, so we can ask, listen and do what matters all year round, and have early promotion of WMTY day.

## **‘What Matters To You?’ Day**

2021 Report  
November 2021