

Project Title

Transforming Workforce Practice with “What Matters to You” (WMTY): A TTSH
Podiatry Experience

Project Lead and Members

Tiffany Chew

Organisation(s) Involved

Tan Tock Seng Hospital

Healthcare Family Group(s) Involved in this Project

Allied Health

Applicable Specialty or Discipline

Podiatry

Project Period

Start date: April 2022

Completed date: Oct 2022 (projected)

Aims

This is a study of staff and patient’s experience as we transform current practice by training Podiatrist to conduct “WMTY” conversations

Background

See poster attached/ below

Methods

See poster attached/ below

Results

See poster attached/ below

Lessons Learnt

No Available

Conclusion

See poster attached/ below

Project Category

Care & Process Redesign

Value Based Care, Patient Reported experience Measures

Keywords

Foot Health, Mental Model, Culture Shift

Name and Email of Project Contact Person(s)

Name: Tiffany Chew

Email: tiffany_chew@ttsh.com.sg

Transforming Workforce Practice with “What Matters to You” A TTSH Podiatry Experience

Tiffany Chew

Podiatry Service, Foot Care & Limb Design Centre, Tan Tock Seng Hospital



Tan Tock Seng
HOSPITAL

National Healthcare Group

INTRODUCTION

“What Matters to You” (WMTY) originated in 2012 as a way of implementing patient-centred care. Yet, research on the practice remains scarce.

Podiatrists play an important role in managing foot health of people with chronic diseases, which often involves the need for behavioural change. Being equipped with skills to conduct “WMTY” conversations will help Podiatrists in their clinical practice.

This is a study of staff and patient’s experience as we transform current practice by training Podiatrists to conduct “WMTY” conversations.

METHODOLOGIES

15 Podiatry staff completed training on “WMTY” in April 2022.

A Word Cloud was performed during the training to understand staff perceptions of treatment non-compliance. The larger the Word the higher the frequency of the factor cited.

2 questionnaires (Table 1) on staff and patients were administered at 3-months and 6-months post training. Results were analysed.

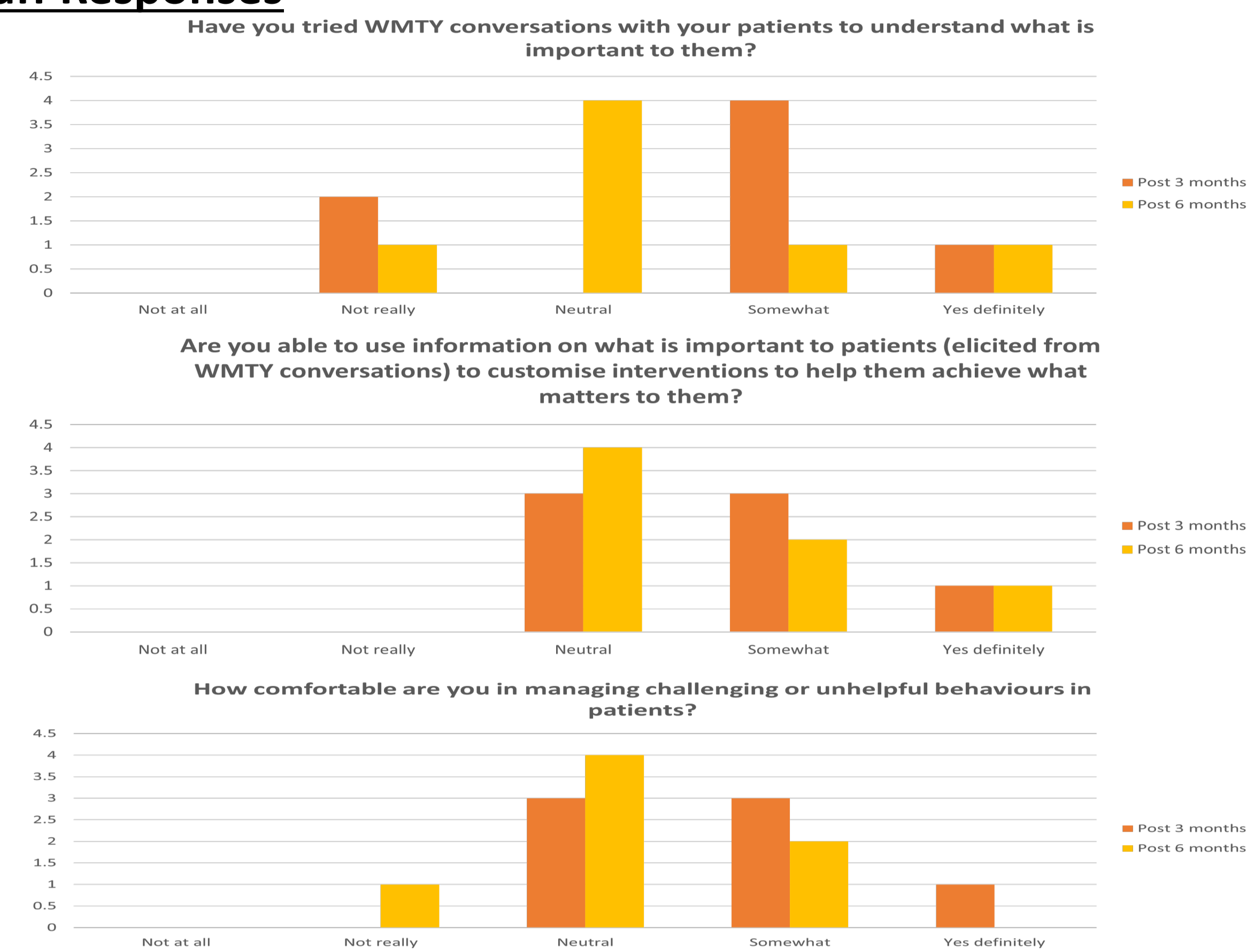
RESULTS

The Word Cloud showed the most cited factors as “poor understanding”, “lazy” and “own beliefs” (Figure 1). At 3-months post-training, 71% of staff used “WMTY” with patients. 57% used “WMTY” to customize interventions. 57% felt comfortable in managing patient behaviours. 67% of patients felt their clinician understood what matters to them, 67% reported willingness to follow clinician’s advice and 71% reported willingness to follow-up.

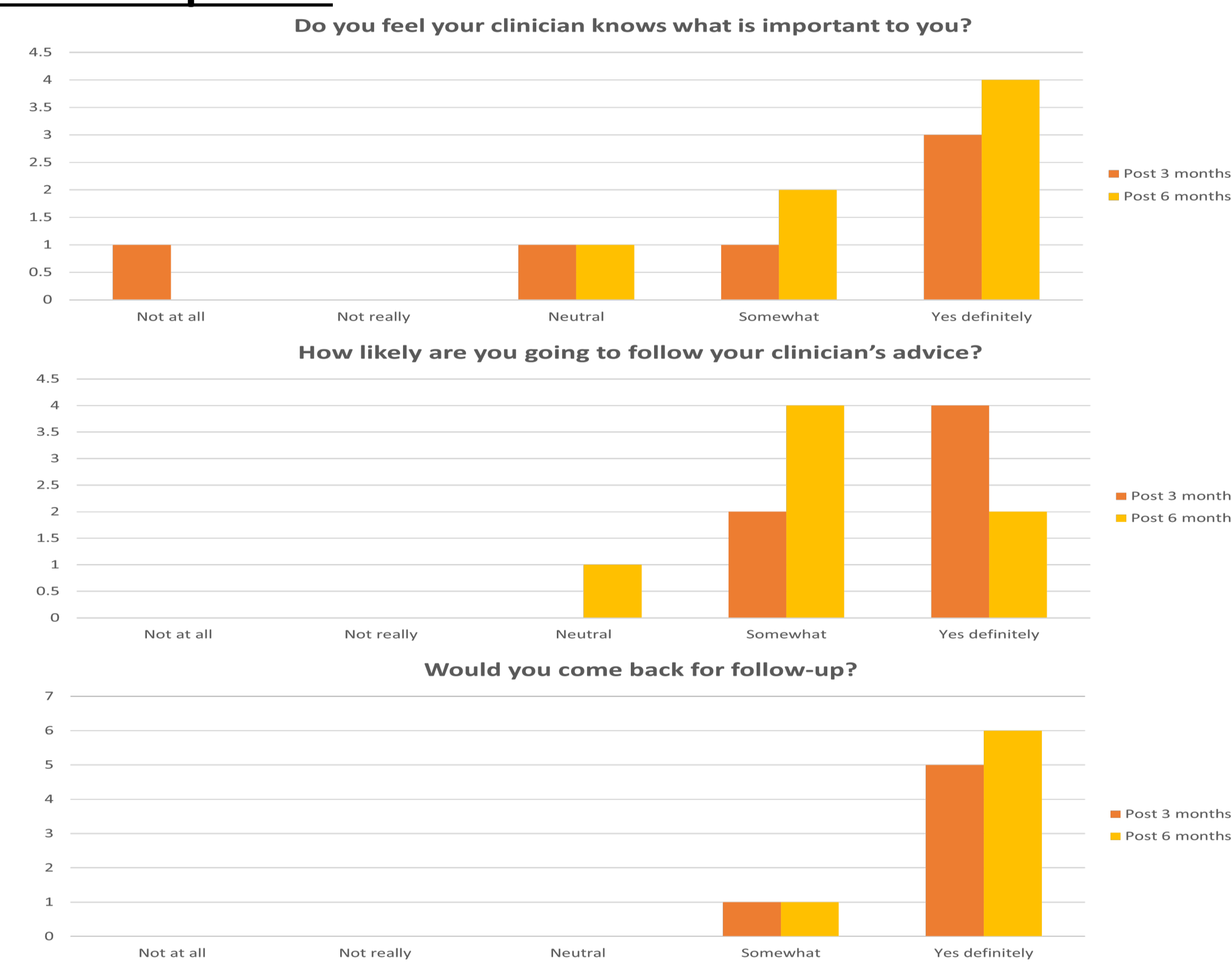
At 6-months post-training, 29% of staff used “WMTY” with patients. 43% used “WMTY” to customize interventions. 29% felt comfortable in managing patient behaviours. 57% of patients felt their clinicians understood what matters to them, 29% reported willingness to follow clinician’s advice, and 71% reported willingness to follow-up.

As “WMTY” utilisation decreased, patients felt less understood and willing to follow clinician’s advice.

Staff Responses



Patient Responses



CONCLUSION

This study shows some relationship between the use of “WMTY” in clinical practice and patients’ feelings of being understood and willingness to change for better health outcomes. The decreased use over the months indicates the need for intentional practice of “WMTY”.

Continuous efforts are needed to transform the workforce to practice “WMTY” and a culture shift in care delivery with “WMTY” as the new norm.

TABLE 1

Table 1. Survey Questions	
Staff (1=Not at all, 2=Not really, 3=Neutral, 4=Somewhat, 5=Yes definitely)	Have you tried WMTY conversations with your patients to understand what is important to them?
	Are you able to use information on what is important to patients (elicited from WMTY conversations) to customise interventions to help them achieve what matters to them?
	How comfortable are you in managing challenging or unhelpful behaviours in patients?
Patients (1=Not at all, 2=Not really, 3=Neutral, 4=Somewhat, 5=Yes definitely)	Do you feel your clinician knows what is important to you?
	How likely are you going to follow your clinician’s advice?
	Would you come back for follow-up?

FIGURE 1

Figure 1. Word Cloud on Staff perception of factors for treatment non-compliance

